Title: A basally active cGAS-STING pathway limits SARS-CoV-2 replication in a subset of

ACE2 positive airway cell models

Maritza Puray-Chavez[1], Jenna E. Eschbach[1], Ming Xia[1], Kyle M. LaPak[2], Qianzi Zhou[1], Ria

Jasuja[2], Jiehong Pan[3], Jian Xu[3], Zixiang Zhou[1], Shawn Mohammed[1], Qibo Wang[1], Dana Q.

Lawson[1], Sanja Djokic[1], Gaopeng Hou[1], Siyuan Ding[1], Steven L. Brody[3], Michael B. Major[2,4],

Dennis Goldfarb[2,5], Sebla B. Kutluay[1,*]

[1]Department of Molecular Microbiology, Washington University School of Medicine, St. Louis,

MO, USA

[2]Department of Cell Biology and Physiology, Washington University School of Medicine, St. Louis,

MO, USA

[3]Division of Pulmonary and Critical Care Medicine, Department of Medicine, Washington

University School of Medicine, St. Louis, MO, USA

[4]Department of Otolaryngology, Washington University School of Medicine, St. Louis, MO, USA

[5]Institute for Informatics, Data Science & Biostatistics, Washington University School of Medicine,

St. Louis, MO, USA.

Running title: Basally active cGAS-STING limits SARS-CoV-2 infection

*Correspondence: kutluay@wustl.edu (S.B.K.)

ABSTRACT

Host factors that define the cellular tropism of SARS-CoV-2 beyond the cognate ACE2 receptor are poorly defined. Here we report that SARS-CoV-2 replication is restricted at a post-entry step in a number of ACE2-positive airway-derived cell lines due to tonic activation of the cGAS-STING pathway mediated by mitochondrial DNA leakage and naturally occurring cGAS and STING variants. Genetic and pharmacological inhibition of the cGAS-STING and type I/III IFN pathways as well as ACE2 overexpression overcome these blocks. SARS-CoV-2 replication in STING knockout cell lines and primary airway cultures induces ISG expression but only in uninfected bystander cells, demonstrating efficient antagonism of the type I/III IFN-pathway in productively infected cells. Pharmacological inhibition of STING in primary airway cells enhances SARS-CoV-2 replication and reduces virus-induced innate immune activation. Together, our study highlights that tonic activation of the cGAS-STING and IFN pathways can impact SARS-CoV-2 cellular tropism in a manner dependent on ACE2 expression levels.

INTRODUCTION

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is continuing to cause significant respiratory disease and mortality in vulnerable populations. The emergence of highly transmissible viral variants resistant to vaccines and existing immunity is an ongoing concern. The innate immune response mediated by type I, type II and type III interferons (IFNs) constitutes a potent block to SARS-CoV-2 replication [1-3]. It remains unknown if IFN-mediated antiviral responses can modulate the cellular tropism of SARS-CoV-2 independently of the cognate host cell SARS-CoV-2 receptor, angiotensin converting enzyme 2 (ACE2). Given the multiple ways in which SARS-CoV-2 can antagonize IFN production and signaling [1-3], a comprehensive understanding of the interplay between these mechanisms may inform the observed multi-organ involvement, reveal new facets of emerging SARS-CoV-2 variants and ultimately identify new opportunities for therapeutic intervention.

SARS-CoV-2 homotrimeric spike (S) glycoprotein binding to the host cell ACE2 receptor mediates viral entry [4-7]. Endogenous ACE2 expression is surprisingly low in the respiratory tract [8,9] compared with higher levels in other tissues of the gastrointestinal tract, kidney and myocardium [10,11]. Although ectopic expression of ACE2 is sufficient for viral entry in several cell culture and animal models [4-7,12], additional factors and host cell proteases including TMPRSS2 may contribute to defining the cellular tropism of SARS-CoV-2 (and variants thereof) at physiological levels of ACE2 expression [13]. Growing evidence suggests that viral attachment factors can facilitate ACE2-dependent and even enable ACE2-independent entry [13,14]. Together, these alternative receptors and attachment factors may compensate for the low levels of ACE2 expression in various organs, including the distal respiratory system.

In addition to the identity and expression of entry factors and receptors, SARS-CoV-2 cellular tropism can in principle be determined by the basal activation of cell intrinsic and innate immune

defenses that are canonically mounted in response to pathogens. For example, a preactivated

antiviral innate immunity in the upper airways of young children has been proposed to limit SARS-

CoV-2 replication [15]. In addition, healthy microbiota and endogenous retrovirus activation can also

promote antiviral innate immunity through cGAS/STING and subsequent type I/III IFN pathway

activation [16-21]. Interestingly, disruptions in microbiota homeostasis in both the respiratory and the

gastrointestinal tracts, the primary targets of SARS-CoV-2 [22-25], have been observed in

hospitalized COVID-19 patients [26-30] highlighting a possible link between basal innate immune

activation and SARS-CoV-2 pathogenesis.

Given the potent antiviral effects of type I/III IFNs, numerous SARS-CoV-2 encoded proteins have

evolved to antagonize IFN synthesis or subsequent IFN signaling pathways to allow efficient viral

spread [1-3]. On the other hand, we and others have shown that the RIG-I-like receptors (RLRs),

RIG-I and MDA5, can detect SARS-CoV-2 replication intermediates [31-37], resulting in robust, albeit

possibly delayed IFN-dependent innate immune activation [38-42]. Of note, severe COVID-19

patients also exhibit an impaired type I and III IFN response but a heightened inflammatory

response [43,44] in part due to the presence of autoantibodies against type I IFNs [45]. Similarly, young

infants exhibit restrained IFN-γ production following SARS-CoV-2 infection compared to adults [46].

Given these multifactorial antagonistic relationships between SARS-CoV-2 and host cells, cell

and tissue tropism and subsequent pathogenesis of SARS-CoV-2 is plausibly shaped by a

complex interplay of receptor presence and expression levels, innate immune activation state of

the target cells and distinct viral proteins that antagonize the host cell antiviral responses.

In this work, we sought to understand the molecular basis of an intrinsic resistance to SARS-CoV-

2 replication in a panel of lung and upper airway cell lines expressing comparably high levels of

endogenous ACE2/TMPRSS2[31] (from herein referred to as ACE2(high)). Analysis of the

transcriptomic signatures of 10 airway-derived cell lines reveal markedly higher levels of ISGs

and IFN pathway mediators in the ACE2(high) cells. A targeted genetic screen in a representative

ACE2(high) cell line reveals that the constitutive activation of the cGAS-STING pathway underlies

the observed IFN pathway activity. Genetic disruption and pharmacological inhibition of the cGAS-

STING and IFN pathways substantially decrease baseline ISG expression and enhance virus

replication in multiple ACE2(high) cell lines. We demonstrate that the basal cGAS-STING pathway

activity in these cells is likely maintained by a combination of mitochondrial DNA (mtDNA) leakage

and naturally occuring cGAS/STING variants that are more prone to activation. ACE2

overexpression efficiently overcomes the IFN-mediated blocks to SARS-CoV-2 replication,

demonstrating the ability of SARS-CoV-2 to overcome these possibly saturable post-entry blocks

to infection. SARS-CoV-2 replication in STING knockout cells and in primary human airway

cultures triggers type I IFN pathway activation, but only in uninfected bystander cells, suggesting

efficient antagonism of the IFN signaling pathway in infected cells. Furthermore, in primary human

airway cultures SARS-CoV-2-infected cells display markedly lower levels of STING expression

and pharmacological inhibition of STING enhances infectious virion release while limiting innate

immune activation. Collectively our study highlights that basal activation of the cGAS-STING and

subsequent IFN pathways contribute to defining the SARS-CoV-2 cellular tropism *in vitro* in a

manner dependent on ACE2 expression levels. Our findings also establish a pivotal role for

STING in establishment of antiviral responses in the relevant airway infection models and expand

the culture models available to study CoV-host interactions.

RESULTS

SARS-CoV-2 replication is blocked at a post-entry stage in a subset of airway-derived cell

lines that endogenously express ACE2.

We previously screened 10 human lung and upper airway cell lines expressing variable levels of

endogenous ACE2/TMPRSS2 for their ability to support SARS-CoV-2 replication[31].

Unexpectedly, we found four cell models—SCC25, H596, OE21 and Detroit 562—that express

comparably higher levels of ACE2 mRNA (**Fig. S1a**) and protein but were resistant to SARS-CoV-2 replication [31]. Of note, these initial screens were conducted with a SARS-CoV-2 stock carrying the S E484D substitution, which arises consistently during cell culture adaptation and allows virus replication in an ACE2-independent manner [31,47]. Given this possible complication, we first validated the ability of virus stocks verified to bear wild type (WT) S to infect these ACE2 expressing cells. SARS-CoV-2 (2019-nCoV/USA-WA1/2020) WT S productively infected PC-9, KYSE-30 and H1299 cells that express lower levels of ACE2 (**Fig. S1a**) in addition to the control Calu-3 and HCC827 cells, as evident from the substantial increase in the amount of cell-associated viral RNA (**Fig. 1a**), viral N antigen (**Fig. S1b**) and infectious virion release in cell culture supernatants (**Fig. 1b**) following virus inoculation. CRISPR-mediated knockout of ACE2 decreased cell-associated SARS-CoV-2 RNA by ~20 to 4000-fold in these cells (**Fig. 1c**), validating the ACE2-dependence of virus replication. In agreement with our prior findings [31], ACE2(high) cell lines including SCC25, H596, OE21 and Detroit 562 were largely resistant to SARS-CoV-2 replication (**Fig. 1a-c, S1b**). Importantly, we found that ACE2 knockout led to a significant reduction in incoming cell-associated SARS-CoV-2 RNA in the ACE2(high) cell lines (**Fig. 1d, e**), suggesting a post-binding and/or post-entry block to virus replication and spread. These results demonstrate that ACE2 expression is not sufficient to allow productive SARS-CoV-2 replication in the ACE2(high) SCC25, H596, OE21, and Detroit 562 cell lines.

ACE2(high) airway-derived cell lines express high baseline levels of IFN pathway genes

A common block to SARS-CoV-2 replication is mediated by type I and type III IFNs [1-3], as exemplified by potent inhibition of SARS-CoV-2 replication by IFN-α pretreatment of Calu-3 cells (**Fig. S2a**). Seeking to understand if IFN pathway activity contributed to SARS-CoV-2 resistance in the ACE2(high) SCC25, H596, OE21, and Detroit 562 cells, we first evaluated the expression of IFN pathway response genes by using publicly available RNA-seq data. Strikingly, transcriptomic signatures of the cell line panel revealed substantially higher basal expression

levels of numerous ISGs, IFN pathway components and inflammatory mediators (e.g. *CCL2*,

CCL5, IL6, CXCL9) in the ACE2(high) cells compared to those that express low to no ACE2 (**Fig.**

2a). RT-qPCR and immunoblotting confirmed this observation and showed markedly high

baseline expression of several ISGs and IFN-pathway mediators (i.e. MX1, IFIT1, STAT1,

pSTAT1, IRF7 and IRF9) in SCC25, H596 and OE21 cells, moderately higher levels of distinct

ISGs in Detroit 562 cells (**Fig. 2b-f, S2b, S2c**). Further investigation of the RNA-seq data revealed

elevated levels of type I and type III IFNs in the ACE2(high) SCC25, H596, OE21 but not Detroit

562 cells or those permissive to infection (**Fig. S2d**); however, the amount of IFN-β and IFN-λ

protein in cell culture supernatants was below the limit of detection in ELISA assays (**Fig. S2e**,

S2f). In addition to the basally high ISG levels and despite the lack of noticeable virus replication,

SCC25, H596, OE21 and Detroit 562 cells responded to SARS-CoV-2 inoculation by further

upregulation of ISGs (**Fig. 2g, 2h, S2g-j**). Collectively, these findings suggest that the basally high

levels of ISG expression, coupled with further elevation of ISGs upon SARS-CoV-2 inoculation,

may underlie the post-entry block to infection in the ACE2(high) SCC25, H596, OE21 and Detroit

562 cells.

Basally active type I/III IFN signaling pathway underlies the resistance of ACE2(high) cell

lines to SARS-CoV-2 replication

To evaluate whether the constitutive activity of the canonical type I/III IFN pathway underlies the

resistance of SCC25, H596, OE21 and Detroit 562 cells to SARS-CoV-2 infection, cells were

pretreated with ruxolitinib, a JAK1/2 inhibitor, and inoculated with SARS-CoV-2 in its presence.

Ruxolitinib pretreatment decreased the baseline expression of five canonical ISGs (*IFIT1*, *MX1,*

IFIT2, ISG15 and *IRF9*) in SCC25 cells (**Fig. 3a, 3b, S3a-c**), though the effects were relatively

modest for certain ISGs. Subsets of these ISGs were also suppressed in the other ACE2(high)

cell models (**Fig. 3a, 3b, S3a-c**). Ruxolitinib treatment resulted in an approximate 3-log increase

in the amount of cell-associated SARS-CoV-2 RNA in OE21 and SCC25, but not in Detroit 562

or H596 cells (**Fig. 3c**). Because of this, we decided to focus our studies primarily on SCC25 cells

with validation experiments in OE21 cells. In agreement with the ruxolitinib data, CRISPR-

mediated knockout of IFNAR and STAT1 (**Fig. S3d**), and siRNA-mediated depletion of

downstream IFN pathway components STAT2 and IRF9 (**Fig. S3e, S3f**) enhanced SARS-CoV-2

replication in SCC25 cells (**Fig. 3d-G, S3g**). STAT1 knockout also increased cell-associated viral

RNA levels in OE21 and more modestly in Detroit 562 cells, whereas H596 cells remained

resistant to infection despite a reduction in ISG expression (**Fig. S3h-k**). Enhancement of SARS-

CoV-2 replication in SCC25 and OE21 cells correlated with a reduction in baseline ISG expression

(**Fig. S3l, S3m**), though we noted that expression of certain ISGs including *IFIT2* and *OASL* was

less sensitive to STAT1 depletion. Together, these data suggest that the high baseline activity of

the canonical type I/III IFN signaling underlies the inability of OE21, SCC25 and Detroit 562 cells

to support SARS-CoV-2 replication.

Tonic activation of the cGAS-STING pathway underlies the resistance of SCC25, OE21 and

Detroit 562 cells to SARS-CoV-2 replication

To identify the molecular basis of the basally high IFN pathway activity in the SCC25 cells, we

conducted an siRNA screen (2 siRNAs/target) targeting host cell factors involved in sensing of

virus replication intermediates including TLRs (e.g. TLR3, TLR7, TLR8 and TLR9), RLRs (e.g.

RIG-I, MDA5 and LGP2) as well as their downstream adaptor molecules (e.g. MyD88, TRIF and

MAVS), NOD-like receptor family members (i.e. NOD2, NLRP1, NLRP3 and NLRC5) and the

cytosolic DNA sensor STING. Remarkably, depletion of STING by two independent siRNAs

substantially increased (~2-3-logs) cell-associated viral RNA levels in SCC25 cells (**Fig. 4a**).

Although knockdown of other sensors and downstream adaptors by individual siRNAs increased

viral RNA levels up to 10-fold, effects were comparably modest and siRNA-specific (**Fig. 4a**).

Consistent with the screening results, CRISPR-mediated knockout of cGAS, STING as well as

downstream signaling molecules TBK1 and IRF3 significantly increased cell-associated viral RNA

and antigen levels in SCC25 (**Fig. 4b, 4c**) as well as OE21 cells (**Fig. S4a**). Constitutive cGAS-

STING pathway activity was also evident in the higher levels of phosphorylated STING and IRF3

present in SCC25 and OE21 cell lysates (**Fig. S4b**). STING knockout also enhanced SARS-CoV-

2 replication in the ACE2(high) Detroit 562 cells, whereas H596 cells remained resistant to

infection (**Fig. S4c, S4d**). Furthermore, STING knockout did not enhance virus replication further

in the otherwise permissive cells (**Fig. S4c, S4d**).

Despite the enhanced SARS-CoV-2 replication in STING KO SCC25 cells, we noted that virus

spread was limited at later time points in infection (**Fig. 4d, S4e**). Ruxolitinib treatment of STING

KO cells allowed greater virus spread (**Fig. 4e**), suggesting that SARS-CoV-2-induced innate

immune activation independent of STING limits viral spread. Interestingly, we found that the

repressive effects of the type I/III IFN pathway were overcome by ACE2 overexpression in

SCC25, OE21, H596 and Detroit 562 cells (**Fig. 4f**) and ruxolitinib treatment did not further

enhance virus replication (**Fig. S4f**). It has been reported that the VOCs are generally less

sensitive to the inhibitory effects of type I IFNs [48]. Ruxolitinib pretreatment enhanced virus

replication 2-3 logs in SCC25 cells for most of the VOCs with the exception of the Delta and Kappa

variant strains, which responded to ruxolitinib treatment only modestly, and the Omicron strain

which remained nonresponsive (**Fig. S4g**). We further evaluated whether the IFN-mediated

restriction of SARS-CoV-2 replication in SCC25 and OE21 cells was mediated by ISGs known to

restrict SARS-CoV-2 replication [49-51] through a targeted siRNA screen. While knockdown of

certain ISGs (i.e. OAS1) enhanced cell-associated SARS-CoV-2 RNA levels modestly, these

effects were relatively modest compared to STING KD/KO and siRNA-specific for both cell models

(**Fig. 4g, h**). Collectively, these results suggest that the basally active cGAS-STING and

downstream type I/III IFN signaling pathways underlie the resistance to SARS-CoV-2 infection in

several ACE2(high) cell line models through the actions of one or more ISGs. While ablation of

this pathway enhances SARS-CoV-2 replication early, induction of the type I/III IFN responses at

later time points post-infection limits spreading infection.

cGAS-STING pathway activity underlies the basally high ISG levels in the ACE2(high) cell

models

To directly link the tonic cGAS-STING pathway activity with high basal levels of ISG expression

in the ACE2(high) cell models, we first interrogated the gene expression profile of WT and STING

KO SCC25, H596, OE21 and Detroit 562 cells by RNA-seq. Of the total of 1740 differentially

expressed genes in WT vs. KO conditions in a given cell line (**Supplementary data 1**), genes

involved in the IFN response pathways stood out as the most significantly downregulated in

STING KO cell lines (**Fig. S5a, S5b, Supplementary data 1**). In total, 71 genes involved in IFN

and inflammatory response pathways were significantly downregulated in one or more cell lines

upon STING KO (**Fig. 5a, Supplementary data 1**). RT-qPCR analysis of select ISGs in cGAS

and STING KO SCC25 cells confirmed these findings (**Fig. S5c**). In agreement with this genetic

evidence, pharmacological inhibition of STING by H-151, which blocks the activation-induced

palmitoylation and clustering of STING [52], and SN-011, which binds to the cyclic dinucleotide

(CDN)-binding pocket of STING and locks it in an open inactive conformation [53], reduced ISG

expression in a dose-dependent manner in ACE2(high) cell lines, with SCC25 and OE21 cells

being the most responsive to treatment (**Fig. 5b-g, S5d-g**). Pre-treatment of SCC25 cells with

SN-011 was sufficient to enhance SARS-CoV-2 replication, whereas H-151 had more modest

effects likely due to less efficient downregulation of ISG expression (**Fig. 5h, 5i**). Expectedly,

STING inhibition in SCC25-STING KO cells didn't further enhance SARS-CoV-2 replication (**Fig.**

5h, 5i). On the other hand, neither SN-011 nor H-151 enhanced SARS-CoV-2 replication in OE21

cells (**Fig. 5h, 5i**), likely due to insufficient inhibition of ISG expression by pre-treatment alone.

Taken together, both genetic and pharmacological evidence presented herein supports the finding

that tonic activation of the cGAS-STING pathway underlies the basally high ISG expression in

multiple airway-derived cell models.

Culture supernatants from and co-culturing with ACE2(high) cell lines induce innate

immune activation

Despite the genetic and pharmacological evidence which strongly suggested the involvement of

type I/III IFN pathway in mediating resistance of the ACE2(high) cells to SARS-CoV-2 replication,

we were unable to detect IFN-β and IFN-λ in culture supernatants. This is possibly due to low

level of cGAS-STING pathway activation (as also evident in P-STING and P-IRF3 blots in **Fig.**

S4b) and/or possibly unstable nature of secreted IFNs in culture media. To further evaluate the

resistance phenotype, we next tested whether culture supernatants from the ACE2(high) cells

can activate the IFN pathway in THP-1 human monocytic cells that are highly responsive to type

I/III IFNs. Although culture supernatants from SCC25, H596 and OE21 cells trended to trigger

ISG expression, as exemplified by the increase in *MX1*, the magnitude of this response was

comparably small to that induced by IFN-α treatment but notably higher than the STING KO

variants (**Fig. 6a**). Notably, co-culturing of suspension THP-1 cells with SCC25, H596 and OE21

cells but not their STING KO derivatives more potently induced *MX1* expression (**Fig. 6b**). A

similar degree of induction was observed in THP-1-cGAS KO cells (**Fig. S6a**), suggesting the

independence of IFN pathway activation on possible PAMPs present in SCC25, H596 and OE21

cells/culture medium.

To evaluate the levels of 2'3'-cGAMP in ACE2(high) cells, we next determined whether post-

nuclear fractions from our cell line panel can trigger IFN-β expression in target cells. While, 2'3'-

cGAMP, but not 2'2'-cGAMP, induced IFN-β expression over 10-fold in THP-1 and THP-1 cGAS

KO cells, PNS from the ACE2(high) cells didn't (**Fig. 6c, S6b**). Predictably, 2'3'-cGAMP didn't

induce IFN-β expression in the THP-1 STING KO cells (**Fig. 6d**). Overall, these experiments

demonstrated that the SCC25, H596 and OE21 cells likely maintain low levels of cGAS-STING-

dependent innate immune activation marked with phenotypically detectable levels of type I/III IFN

secretion.

SARS-CoV-2 antagonizes the IFN but not inflammatory pathway activity in infected cells

The limited virus spread in STING KO SCC25 cells (**Fig. 4d, 4e, S4e**) prompted us to further

investigate the interplay between cGAS-STING-mediated activation of the IFN pathway and

SARS-CoV-2 infection. Despite the noted reduction in ISG expression (**Fig. 5a, S5c, S7a**), cGAS

and STING KO cells still mounted substantial increases in ISGs expression in response to SARS-

CoV-2 replication (**Fig. 7a**), nearing levels observed in WT SCC25 cells (**Fig. 7b**). In agreement

with prior studies [31-37], this response was mediated by sensing of SARS-CoV-2 replication

intermediates by RIG-I-like receptors, RIG-I and MDA5, whose knockdown abolished ISG

induction (**Fig. S7b**). Most notably and in agreement with prior work [54], in SARS-CoV-2-infected

SCC25-STING KO cells, ISG induction, as exemplified by IFIT3, was largely limited to uninfected

bystander cells; cells infected with SARS-CoV-2 were devoid of IFIT3 (**Fig. 7c, S7c, S7d**). Further

characterization of single-cell sorted infected and bystander cells revealed a general suppression

of ISG expression but elevated expression of numerous inflammatory mediators, including

CXCL1, *CXCL2*, *CXCL10* and *CCL20* in infected cells (**Fig. 7d, e**). These findings collectively

suggest that SARS-CoV-2 can efficiently antagonize IFN signaling but not IFN production or

inflammatory pathways in infected cells and that IFN signaling in bystander cells limits viral spread

in settings where ACE2 is expressed at endogenous levels.

Dissection of mechanisms that maintain tonic cGAS-STING pathway activity

To identify the mechanisms that may underlie tonic activation of the cGAS-STING pathway, we

primarily focused on the role of TREX1 endonuclease [55,56], possible mutations within components

of the cGAS and STING pathway, mitochondrial DNA leakage [57,58] and the levels and activities of

endogenous retroviruses and transposable elements [20]. SCC25, H596, OE21 and Detroit 562

cells expressed equivalent levels of TREX1 (**Fig. S8A**) and while TREX1 KO modestly elevated

ISG expression in SCC25, H596 and Detroit 562 cells, OE21 TREX1 KO cells displayed

surprisingly lower levels of ISGs (**Fig. 8A, S8B**). Interrogation of the RNA-seq data (**Fig. 5A**)

revealed that all four cell lines expressed the common H232R variant of STING (**Fig. 8B**), which

more potently activates innate immunity than the less common H232 variant [59,60]. In addition,

H596 and Detroit 562 cells expressed the cGAS T35N and T35N/P261H variants, respectively.

Of note, cGAS P261H variant has recently been reported to maintain baseline innate immune

activation [61]. Although these naturally occurring variants can contribute to the basal levels of ISGs,

we did not identify canonical STING activating mutations such R284M/G or V155M more

commonly associated with inflammatory conditions [62]. No other mutations were identified in

TREX1 or ENPP1, the main 2'3'-cGAMP hydrolase. While we did not detect higher levels of

cytosolic mtDNA in the ACE2(high) cell lines (**Fig. S8C**), VBIT-4, a VDAC inhibitor that prevents

its oligomerization and subsequent mtDNA leakage into the cytosol, diminished ISG expression

in SCC25, OE21 and more modestly in Detroit 562 cells, but had no effect on ISG levels in H596

cells (**Fig. 8C**). Furthermore, extended culturing of ACE2(high) cells in the presence of nucleoside

analog azidothymidine (AZT), which has been shown to be active against endogenous virus

reverse transcriptases [63] did not reduce ISG levels (**Fig. 8D, S8D**). In agreement, we did not find

an association between cytosolic ERV/LINE DNA (**Fig. 8E**) or RNA levels (**Fig. S8E**) and basally

high ISG expression in the cell line panel. Taken together, these findings suggest that mtDNA

leakage combined with naturally occurring cGAS and STING variants may explain the tonic

cGAS-STING pathway activity in the ACE2(high) cell lines.

In primary airway cultures, SARS-CoV-2 induces ISG expression in bystander and

antagonizes STING expression in infected cells

To extend the findings from our cell line studies to a physiologically relevant model, we next

investigated the expression levels of two representative ISGs (i.e. IFIT2, ISG15) and STING in

primary human airway epithelial cells (hTECs) grown at the air-liquid interface. Of the five donors

analyzed, all except for Donor 2 appeared to express IFIT2 in a subset of cells in the absence of

infection (**Fig. 9A**). SARS-CoV-2 infection resulted in an increase in IFIT2 expression in all donors

(**Fig.9A**). Remarkably, as in SCC25 STING KO cells, we found that IFIT2 expression was largely

limited to uninfected bystander cells (**Fig.9A-C**) and similar results were observed with ISG15

(**Fig. 9D, 9E, S9A**). All five hTECs donors endogenously expressed STING (**Fig. S9B**) and SARS-

CoV-2 infection resulted in a modest increase in STING expression (**Fig. 9F, S9C**); however, we

found that infected cells were largely devoid of STING (**Fig. 9F, 9G, S9C, S9D**). Inhibition of

STING by both SN-011 and H-151 modestly enhanced infectious virion release (**Fig. 9H**), which

in the case of H-151 correlated with a decrease in ISG expression in infected hTECs (**Fig. 9I**). In

contrast, SN-011 only modestly reduced ISG expression in one Donor and ISG15 expression in

all donors (**Fig. S9E**). Analysis of publicly accessible single-cell data sets revealed STING and

ISG expression in healthy alveolar type-1 (AT1) human airway cells but not in alveolar type-2

(AT2) cells (**Fig. 10**), which are the primary targets of SARS-CoV-2 [64]. Together, these findings

establish an inhibitory role for STING in SARS-CoV-2 replication and highlight it as a possible

factor that contributes to defining the cellular tropism of SARS-CoV-2. These experiments also

validate our findings from the cell line models in physiologically relevant settings and demonstrate

efficient antagonism of the IFN pathway in productively infected cells.

DISCUSSION

Because ectopic expression of ACE2 allows efficient SARS-CoV-2 replication in numerous cell

lines and animal models [4-7,12], it is generally thought that ACE2 is the main factor that defines the

cellular tropism of SARS-CoV-2. Our findings challenge this notion and demonstrate that in cells

that express endogenous levels of ACE2, baseline activation of the type I/III IFN pathway

efficiently limits virus replication at a post-entry step. Interestingly, we found that ectopic

expression of ACE2 overcomes the ISG-mediated restriction to SARS-CoV-2 replication in these

cell models, suggesting the ability of SARS-CoV-2 to antagonize these blocks at higher

multiplicities of infection and possibly their saturable nature. In addition to providing novel insight

to molecular mechanisms that govern the cellular tropism of SARS-CoV-2, the ACE2(high) cells

studied here can serve as unique models to study the molecular details of innate host responses

against SARS-CoV-2.

Our study revealed that the basal activity of cGAS and STING—which have well described roles

in sensing of cytosolic DNA including virus replication intermediates [65,66]—underpins the IFN

pathway activation in three separate ACE2(high) cell lines. With regards to what activates the

cGAS-STING pathway, we found the involvement of mtDNA leakage in SCC25 and OE21 cells

and possibly naturally occurring cGAS and STING mutations that are more prone to activation in

the other ACE2(high) cell models. It is, however, important to emphasize that the degree of cGAS-

STING pathway activation in the cell lines we studied is likely low and/or present only in a

subpopulation of the cells in culture. This would explain why extended treatment with VBIT-4

reduced ISG expression despite the lack of detectable cytosolic mtDNA and 2'3'-cGAMP, the low

levels of IFNs present in culture supernatants and phosphorylated STING and IRF3 in cell lysates.

What activates the mtDNA leakage is less clear and it is possible that genomic instability

commonly present in cancer cell lines [67] may also contribute.

Activation of the cGAS-STING pathway has been shown to contribute to SARS-CoV-2

immunopathology and establishment of antiviral defenses [68]. In macrophages, cGAS activation

from engulfed DNA of dying endothelial cells near sites of tissue damage can trigger type I IFN

responses leading to lung inflammation in COVID-19 patients [69]. In addition, in SARS-CoV-2-

infected cells both mitochondrial and nuclear DNA leakage into the cytosol can activate cGAS-

STING signaling [69,70]. While STING agonists in uninfected cells can block SARS-CoV-2 infection

via triggering type I IFNs [54,71,72], pharmacological inhibition of STING reduces severe lung

inflammation induced by SARS-CoV-2 and improves disease outcome in mice [68]. Our study

supports the published antiviral functions of cGAS-STING pathway, highlights it as a key factor in

mounting the antiviral defenses, and further expands its role to defining the cellular tropism of

SARS-CoV-2 *in vitro*. Healthy gut microbiome-induced cGAS-STING activation at a basal state *in*

vivo [19] represents a particularly relevant context for our observations. SARS-CoV-2 can efficiently

infect cells within gastrointestinal tract *in vitro* [73,74], but it is possible that microbiota-induced

activation of the cGAS-STING pathway can limit SARS-CoV-2 replication within the GI tract or its

tropism within particular cell subsets therein. Although STING didn't appear to be involved in host

defense and pathology in a mouse model [75], the use of non-native K18 promoter driving ACE2

overexpression in tissues, which we show can decrease sensitivity to IFN-mediated inhibition, is

a possible caveat.

Our findings are also suggestive of an antagonistic relationship between SARS-CoV-2 and STING

in the primary HBEC-ALI cells; a significant number of productively infected cells lack STING

expression (**Fig. 9f, 9g, S9c, S9d**) and STING inhibitors modestly enhanced virus replication

while decreasing innate immune activation (**Fig. 9h, 9i, S9e**). It will be important to determine

whether this reduction in STING levels in infected primary airway cells is due to direct antagonism

by SARS-CoV-2 proteins, such as ORF3a, ORF10 and 3CLpro have been shown to antagonize

the cGAS-STING pathway largely through inhibition of downstream signaling [76-78]. Alternatively,

SARS-CoV-2 may preferentially infect of cells that lack STING and hence those cells with lower

levels of basal innate immune activation. We note that the effects of STING inhibitors on SARS-

CoV-2 replication in in primary cells was relatively modest and that only H-151 reduced innate

immune activation whereas SN-011 was ineffective (**Fig. 9h, 9i, S9e**). These discrepancies may

in part be due to the inability to fully target STING in the ciliated cells at the air-facing side; STING

inhibitors needed to be provided in the liquid phase to maintain ALI integrity with the assumption

that they would diffuse to the ciliated cells efficiently and equally. More targeted genetic ablation

of STING in primary cells and in vivo models will be needed to address this possible shortcoming.

While our data strongly suggests that cGAS-STING pathway activation underlies the resistance

phenotype of multiple ACE2(high) cell models, there were notable differences between these cell

lines as well. First, Detroit 562 cells supported only low levels of virus replication upon STING KO

which persisted even after ACE2 overexpression, suggesting the presence of other independent

blocks to replication. Second, despite successful virus binding/entry (**Fig. 1d, e**) and the notable

reduction in numerous IFN pathway genes upon STING and STAT1 KO (**Fig. S3k, 5a**), H596

cells did not support SARS-CoV-2 replication and required ectopic ACE2 expression. Given the

importance of TMPRSS2 in defining the cellular tropism of SARS-CoV-2 [13], it is important to note

that both Detroit 562 and H596 cells expressed comparably higher levels of TMPRSS2 (**Fig. S1a**),

suggesting the likelihood of a different post-entry block to replication. Third, pretreatment of

SCC25 but not OE21 cells with STING inhibitors was sufficient to enhance SARS-CoV-2

replication, suggesting a higher degree of STING activation in the latter, as also supported by the

higher levels of P-IRF3 detected in cell lysates (**Fig. S4b**). Fourth, all cell lines expressed distinct

sets of ISGs and inflammatory genes basally, suggesting that the SARS-CoV-2 resistance may

be mediated by different effector molecules. Moving forward, understanding the molecular basis

of these post-entry blocks through comparative analysis of the cell models presented herein can

reveal novel cell intrinsic mechanisms that limit SARS-CoV-2 replication.

IFN signaling leads to the transcriptional upregulation of hundreds of ISGs, many of which are

effector molecules that limit virus replication by distinct mechanisms [79,80]. Several studies have

reported on ISG screens and individual antiviral properties of ISGs against SARS-CoV-2, as

summarized recently [2]. Our findings suggest that the ISGs with previously demonstrated antiviral

activity against SARS-CoV-2 are unlikely to explain the resistance phenotype of the ACE2(high)

cells (**Fig. 4g, 4h**). Whether a dominant ISG or multiple ISGs limit SARS-CoV-2 replication in our

cell models remains unknown. Of note, many of the prior ISG screens have been conducted in

ACE2 overexpressing cells or cell lines of non-airway origin. In light of our finding that ACE2

overexpression relieves ISG-mediated restriction of SARS-CoV-2 replication (**Fig. 4f, S4f**), we

propose that the cell models studied herein provide a unique platform to discover the antiviral

activities of ISGs.

SARS-CoV-2 encodes numerous non-structural and accessory proteins that can antagonize IFN-

mediated innate immune responses by blocking the production of IFN-β, directly interacting with

IFN pathway components and inhibiting IFN signaling, or inhibiting the activities of specific ISGs

[81,82]. Given that ISG expression is limited to uninfected bystander cells in both SCC25 STING KO

cells and primary airway cultures, our findings suggest that SARS-CoV-2 replication prevents IFN

signaling but not IFN production in infected cells. While these findings are in agreement with a

SARS-CoV-2-infected gut organoid system [83], others have reported ISG expression in both

infected and bystander cells in a similar HBEC-ALI setting [84]. It remains to be determined whether

one or more of the abovementioned SARS-CoV-2 proteins is sufficient to block IFN signaling in

the cell models presented here.

Understanding the fundamental biology of how SARS-CoV-2 interacts with the innate immune

responses in tractable cell culture-based systems is critical to our understanding of the complex

SARS-CoV-2 pathogenesis *in vivo.* Our study highlights that basal activation of the cGAS-STING

and IFN pathways can contribute to defining the SARS-CoV-2 cellular tropism at physiologically

relevant ACE2 expression levels. While correlative, it is noteworthy that three of the four

ACE2(high)/ISG(high) cell lines (SCC25, OE21, Detroit 562) are derived from the upper airways,

whereby cGAS-STING mediated restriction may be operative. Our findings also demonstrate the

ability of SARS-CoV-2 to efficiently antagonize the IFN pathway, but not RLR-dependent innate

immune sensing and IFN production once productive infection is established. Further dissection

of these pathways may lead to the identification of actionable host cell targets that are central to

the complex SARS-CoV-2 pathogenesis.

METHODS

Our research complies with all relevant ethical regulations and all relevant protocols have been

approved by Washington University School of Medicine Institutional Biological and Chemical

Safety Committee. The human airway epithelial cells are isolated from non-living individuals, and

therefore research involving the use of these cells is exempt from human subjects regulations as

determined by the Washington University Institutional Review Board.

Cell Culture and Compounds

All cell lines were maintained in a humidified incubator at 37°C with 5% CO_2 unless otherwise

indicated. Cell line identities were validated by short tandem repeat analysis (LabCorp, Genetica

Cell Line Testing) and cultures were regularly tested for mycoplasma contamination using the

MycoAlert mycoplasma detection kit (Lonza). HEK293T and Calu-3 (ATCC-HTB-55) cells were

cultured in Dulbecco's Modified Eagle's Medium (DMEM, Sigma), supplemented with 10% FBS

(VWR). Vero CCL-81, Vero E6 and Vero E6-TMPRSS2 (kind gift of Whelan lab [85]) cells were

cultured in DMEM, supplemented with 10% FBS and 10 mM HEPES buffer. The A427 lung

carcinoma (kind gift from Bernard Weissman Lab (UNC)) and Detroit 562 pharyngeal carcinoma

(ATCC-CCL-138) cell lines were cultured in Eagle's Minimum Essential Medium (EMEM,

Corning), supplemented with 10% FBS (Sigma), and 2 mmol/L ʟ-glutamine (Gibco). The SCC25

squamous cell carcinoma (kind gift from the John Hayes Lab (UTHSC)) cell line isolated from

tongue was cultured in DMEM:F12 (Corning) supplemented with 10% FBS (Sigma). The H522

non-small cell lung adenocarcinoma (ATCC-CRL-5810), H596 adenosquamous lung carcinoma

(ATCC HTB-178), H1299 non-small cell lung carcinoma (ATCC CRL-5803), HCC827 lung

adenocarcinoma (ATCC CRL-2868), PC-9 lung adenocarcinoma (Sigma #90071810), KYSE30

oesophageal squamous cell carcinoma (kind gift from the John Hayes Lab), and OE21

oesophageal squamous cell carcinoma (Sigma # 96062201) cell lines were cultured in Roswell

Park Memorial Institute (RPMI) 1640 (Corning) with L-glutamine supplemented with 10% FBS

(Sigma). THP-1 cells (ATCC#TIB-202) and its derivatives described previously[86] were grown in

RPMI-1640 media supplemented with 10% heat-inactivated fetal bovine serum.

Primary human bronchial epithelial cells (HBECs) grown at air-liquid interface (ALI) were

processed as follows. Human airway epithelial cells were isolated from surgical excess of

tracheobronchial segments of lungs donated for transplantation as previously described and were

exempt from regulation by US Department of Health and Human Services regulation 45 Code of

Federal Regulations Part 46 [87]. Tracheobronchial cells were expanded in culture, seeded on

supported membranes (Transwell; Corning, Inc.), and differentiated using ALI conditions as

detailed before using 24-well inserts [88,89].

The following compounds were reconstituted in solvents following manufacturer's instructions and

stored in aliquots in -80. 2'3'-cGAMP (Invivogen, Cat no: tlrl-nacga23-1), 2'2'-cGAMP (Cayman,

Cat no: 22419, H-151 (MedChemExpress, Cat no: HY-112693, Lot no:261833), SN-011

(MedChemExpress, Cat no: HY-145010, Lot no: 149227), VBIT-4, azidothymidine (AZT, NIH

AIDS Reagents, Cat no: HRP-3485). Cells were treated as indicated in figure legends and mock-

treated cells were included as controls in all experiments.

Viral Strains

SARS-CoV-2 strain 2019-nCoV/USA-WA1/2020 was obtained from Centers for Disease Control

and Prevention (a gift of Natalie Thornburg). The mNeonGreen (mNG) SARS-CoV-2 reporter

virus [90] was a gift of Pei-Yong Shi lab, and SARS-CoV-2 Lambda, Iota, Mu, Beta, Epsilon, Delta,

Kappa, and Omicron variant isolates were obtained from Dr. Michael S. Diamond. SARS-CoV-2,

SARS-CoV-2-mNG and variant isolates were propagated in Vero E6-TMPRSS2 at an MOI of 0.01

grown in DMEM (Sigma), supplemented with 2% Fetal Bovine Serum (FBS, VWR) and 10 mM

HEPES buffer (Corning). SARS-CoV-2 Omicron variant strain was grown in DMEM supplemented

with 1% FBS. After amplification, the viral stocks were titered on Vero-TMPRSS2 cells by plaque

assays and sequence confirmed. All experiments involving SARS-CoV-2 were performed in a

biosafety level 3 laboratory.

SARS-CoV-2 infections and focus-forming assay

Cells seeded at 70-80% density were inoculated with virus diluted in cell culture media

supplemented with 2% FBS and intermittent rocking for 1 h. Virus inoculum was removed, cells

washed with 1x phosphate-buffered saline (PBS) and plated in cell culture media containing 10%

FBS. Infections were monitored by focus-forming assay, and RT-qPCR of cell-associated vRNA

(N sub-genomic RNA). Briefly, for focus-forming assay, Vero E6-TMPRSS2 cells were inoculated

with 10-fold serial dilutions of virus containing supernatants from the panel of airway cell lines,

incubated for 1 h at 37°C with intermittent rocking, followed by addition of 2% methylcellulose and

2X MEM containing 4% FBS. 30 hours post-infection cells were fixed by 4% paraformaldehyde

(PFA) and stained as previously described [85]. Briefly, cells were incubated with CR3022 anti-S

antibody (1 ug/mL)[91] overnight followed by anti-human IgG-HRP-conjugated goat secondary

antibody (Sigma, 1:500) for 2 h, then foci were visualized with TrueBlue peroxidase substrate

(KPL, #5510-0050) and manually counted under the microscope.

Prior to infection, HBECs were washed two times with 1× PBS to remove the mucous layer that

otherwise can slow down infection. HBECs were inoculated with SARS-CoV-2-mNG in DMEM-

supplemented with 2% FBS for two hours in a humidified incubator at 37°C, after which the initial

inoculum was removed, cells washed with 1xPBS and maintained at ALI for the duration of the

assays. Subsequently, cells were fixed with 4% paraformaldehyde and subjected to

immunofluorescence microscopy as detailed below.

ACE2 overexpression, lentivirus production and transduction

Cell lines stably expressing human ACE2 were generated by lentiviral transduction as described

before[31]. Briefly, lentiviruses were produced in HEK293T cells by polyethyleneimine

(Polysciences)-mediated transfection using an pLV-EF1a-IRES-Puro (Addgene Plasmid

#85132)-based vector expressing human ACE2, psPAX2 as packaging plasmid (Addgene

#12260) and VSV-G expressing envelope plasmid (Addgene #12259). Cell culture supernatants

containing lentiviruses were collected and used to transduce SCC25, OE21, Detroit 562, H522

and H596 airway cell lines. Two days post transduction, cells were selected for two weeks in 2

μg/mL puromycin to generate bulk populations expressing ACE2.

CRISPR knockout cell lines

ACE2 knockout cell lines were generated as previously stated [31]. In short, lentiviruses were

generated in HEK293T cells by transfection of pLentiCRISPRv2 -Puro plasmid containing a single

guide RNA (sgRNA) (GTACTGTAGATGGTGCTCAT) (GenScript) targeting ACE2, psPAX2

packaging plasmids (Addgene #12260), and pMD2.G plasmid expressing VSV-G (Addgene

#12259) in a ratio of 1:1:0.2 respectively using polyethyleneimine. After transduction of PC-9,

KYSE30, HCC827, H1299, SCC25, OE21, A427, Detroit 562, and H596 airway cell lines with the

resulting lentiviruses, cells were selected in 2 μg /mL puromycin for two weeks.

cGAS-STING pathway (i.e. cGAS, STING, TBK1, and IRF3), STAT1, and TREX1 knockout cell

lines were generated similarly by transduction using lentiviral particles generated using

pLentiCRISPRv2 -Puro encoding two separate gene-specific sgRNA per target (Table S1),

psPAX2, and VSV-G as described above. Following transduction, SCC25, H596, OE21, and

Detroit 562 cell lines were selected in 2 μg/mL puromycin for at least two weeks. In all

experiments, bulk populations were used for downstream analyses. cGAS and STING KO THP-

1 cells were explained before[86].

RNA extraction and RT-qPCR

Cell associated RNA was extracted by Trizol following manufacturer's instructions (Thermo-Fisher

Scientific) and was subjected to RT-qPCR analysis for viral (*N* sgRNA) or cellular RNAs. SARS-

CoV-2 viral RNA was detected by reverse transcription and amplification using the TaqMan RNA-

to-CT 1-Step Kit (Thermo Fisher Scientific), utilizing the primers and probe sequences for viral

RNAs are as described before [76]. Briefly, reverse transcription was performed at 48 °C for

15 minutes, followed by a 2-minute incubation at 95 °C. Amplification was carried out over 50

cycles, with each cycle consisting of a 15 second denaturation step at 95 °C, followed by a 1-

minute annealing/extension step at 60 °C. The quantification of SARS-CoV-2 N gene RNA copies

was determined using a previously published internal RNA standard [92]. To study the type I/III IFN

response at baseline and in response to various stimuli, cellular RNA was reverse transcribed

with High-Capacity cDNA Reverse Transcription kit (Thermo Fisher Scientific) followed by RT-

qPCR analysis using PowerUp SYBR Green Master Mix (Applied Biosystems), utilizing specific

primers that are listed in the Table S2. RNA levels were quantified using the $2^{-\Delta\Delta CT}$ method and

normalized relative to *18S rRNA* as the reference target.

Viral RNA detection by RNAscope

SARS-CoV-2 RNA was detected as described before (41) with minor modifications using the

RNAscope Multiplex Fluorescent Reagent Kit v2 (Advanced Cell Diagnostics catalog #323100).

One day after attachment on coverslips placed in 24-well plates, cells were infected with SARS-

CoV-2 at an MOI of 2 for 1 h, then washed twice with 1x PBS and fresh media was added. Cells

were fixed with 4% PFA at 2 hours post infection, dehydrated and stored at -20°C. On the day of

detection, cells were rehydrated and incubated in 0.1% Tween in PBS for 10 min and immobilized

on slides. Before probing, cells were first treated with hydrogen peroxide (Advanced Cell

Diagnostics catalog #322381) and 1:5 diluted protease III (Advanced Cell Diagnostics catalog

#322381) each for 10 minutes at room temperature. Immediately after, an anti-sense RNAscope

Probe-V-nCoV2019-S (Advanced Cell Diagnostics catalog #848561) targeting SARS-CoV-2

positive strand S RNA was allowed to hybridize at 40°C for 2 hr. All consecutive incubations were

performed at 40°C unless otherwise indicated. After probe hybridization, Amplifiers (Amp) were

added sequentially as follows; Amp 1 for 30 min, followed by Amp 2 for 30 min, and Amp 3 for 15

min. Samples were then incubated with detection reagents including horseradish peroxidase

(HRP)-C1 for 15 min, diluted Tyramide Signal Amplification (TSA) Vivid Fluorophore 520 (1:1500,

Advanced Cell Diagnostics catalog #323271) in TSA buffer (Advanced Cell Diagnostics catalog

#322809) for 30 min and HRP blocker for 30 min. Nuclei were stained with DAPI at room

temperature for 30 sec. Coverslips were mounted on slides using Prolong Gold Antifade. Images

were taken using a Zeiss LSM 880 Airyscan confocal microscope equipped with a 63/1.4 oil-

immersion objective.

Immunofluorescence microscopy

SARS-CoV-2 N protein was visualized in infected cells as before [31]. Briefly, cells grown on

coverslips (Neuvitro, #GG-12-1.5-Collagen) were infected with SARS-CoV-2 and fixed with 4%

paraformaldehyde. Coverslips were washed with 1X PBS, incubated in 1% bovine serum albumin

(BSA) and 10% FBS in PBS containing 0.1% Tween-20 (PBST) at room temperature for 1 h.

Samples were then incubated in a primary mouse SARS-CoV-2 nucleocapsid (N) antibody (Sino

Biological Inc., Cat # 40588-T62, 1:1000) at 4 °C overnight. After washing with PBST, samples

were incubated in a goat anti-mouse secondary antibody conjugated to Alexa Fluor Plus 488

(Invitrogen, Cat# A-11029, 1:1000) at room temperature for 1 h. IFIT3, IFIT2, ISG15 and STING

were detected by incubation with a primary rabbit polyclonal IFIT3 antibody (Novus Biologicals

NBP2-32500, 1:500), rabbit polyclonal IFIT2 antibody (Novus Biologicals NBP2-15180SS, 1:500),

rabbit polyclonal ISG15 antibody (Proteintech 15981-1-AP, 1:250) and rabbit polyclonal STING

antibody (Proteintech 19851-1-AP, 1:200) respectively as described above followed by incubation

with a goat anti-rabbit fluorescent secondary antibody (Invitrogen Goat anti-Rabbit Alexa Fluor

Plus 568™, Cat# A-11036, 1:1000 or Invitrogen Goat anti-Rabbit Alexa Fluor™ Plus 647, Catalog

A32733TR, 1:1000). Nuclei were stained with DAPI diluted in PBS at room temperature for

5 min. Finally, coverslips were washed in PBST followed by PBS and then mounted on slides

using Prolong Gold Antifade.

For confocal microscopy, samples were analyzed with a Zeiss LSM880 laser

scanning confocal microscope (Carl Zeiss Inc. Thornwood, NY). The system is equipped with

405nm diode, 488nm Argon, 543nm HeNe, and 633nm HeNe lasers. Plan-Apochromat 20X

numerical aperture (NA) 0.8), Plan-Apochromat 40X (NA 1.4) DIC oil, and Plan-Apochromat 63X

(NA 1.4) DIC oil objectives were used. ZEN black software (version 2.1 SP3) was used for

multichannel image acquisition and for obtaining Z stacks with optimal interval and section

thickness. The image analysis software Volocity with Visualization module (version 6.3)

(PerkinElmer, Waltham, MA) was used for 3-dimensional rendering of Z slices acquired through

the depth of the cell monolayers. Colocalization analysis of Z stacks was performed using the

Colocalization module of Volocity. For epifluorescence microscopy, images were taken using

Leica using either the ×4 or ×20 objective.

Immunoblotting

Human cell lines were grown to 70% confluence and lysed in 1X RIPA buffer (50mM Tris-HCl pH

7.4, 150mM NaCl, 1mM EDTA, 0.1% SDS, 1% NP-40, 0.25% sodium deoxycholate)

supplemented with EDTA-free protease inhibitor cocktail (Roche). Proteins were separated by

SDS-PAGE on 4-12% Bis-Tris gels, transferred to a nitrocellulose membranes, blocked in

Intercept (PBS) blocking buffer (LI-COR) or 5% milk, and incubated with primary antibodies

overnight at 4°C. Washed membranes were incubated for 45 min to 1 hour at room temperature

in secondary antibody solution (LI-COR IRDye 680, 800; 1:10,000 in 5% milk or Intercept (PBS)

blocking buffer), imaged on an Odyssey® CLx scanner, and analyzed using the Image Studio

Software. Antibodies were used at the following dilutions: ACE2 (R&D Systems #AF933, 1:200),

β-actin (Sigma #A5316, 1:5000 or Santa Cruz Biotech #sc8432, 1:500), Vinculin (Santa Cruz #sc-

73614, 1:2000), pSTAT1-Y701 (Cell Signaling #9167, 1:1000), pSTAT1-S727 (Cell Signaling

#8826, 1:1000), STAT1 (Cell Signaling #14994, 1:1000), MX1 (Cell Signaling #37849, 1:1000),

IFIT1 (Cell Signaling #14769, 1:1000), STING (Cell Signaling #13647S, 1:1000), cGAS (Cell

Signaling #15102S, 1:1000), TBK1 (Cell Signaling #38066S, 1:1000), IRF3 (Cell Signaling

#4302S, 1:1000), SARS-CoV-2 Nucleocapsid (Sino Biological # 40588-T62, 1;1000 or # 40143-

MM05, 1:1000), P-STING S366 (Cell Signaling #D7C3S, 1:1000), P-IRF3 S396 (Cell Signaling

#4D4G, 1:1000) and TREX1 (Cell Signaling #15107S, 1:1000) antibodies.

Flow cytometry

SARS-CoV-2 mNG infected cells were detached with trypsin and fixed with 4% paraformaldehyde

at room temperature for 20 min. After fixation, cells were collected by centrifugation, resuspended

in 1X PBS and subjected to flow cytometry directly or processed for staining. For staining, cells

were permabilized in 1X PBS supplemented with 0.5% Tween-20 (PBST) for 10 min, washed

once with 1X PBS and blocked by incubation in 1X PBST supplemented with 1% bovine serum

albumin and 10% FBS for 1h at room tempreature. Samples were then incubated in a primary

rabbit polyclonal antibody against IFIT3 (Novus Biologicals, NBP2-32500, 1:500) at 4 ° C

overnight followed by staining with a goat anti-rabbit Alexa Fluor Plus 647 (Life Technologies,

A32733TR, 1:1000) for 1 h at room temperature. Cells were washed in 1X PBST in between

antibody incubations and resuspended in 1X PBS. Flow cytometry was performed using BD LSR

Fortessa flow cytometer and analyzed by FlowJo software.

siRNA transfections

siRNAs (Table S3) were reverse-transfected as described before [31]. In brief, 5 pmoles of siRNAs

for each target was complexed with 1.5 μL of Lipofectamine RNAiMAX transfection reagent in 50

μL of Opti-MEM following manufacturer's recommendations and added in 24-well cell culture

dishes. SCC25 or OE21 cells were then seeded at 1x10^5 cells/well. At 2-days post-transfection

cells were infected with SARS-CoV-2 at an MOI of 2 i.u./cell, and RNA extracted 3 days later by

Trizol and processed for RT-qPCR analysis as above. Knockdown efficiency was assessed by

RT-qPCR or immunoblotting.

Analyses of IFN activity in culture supernatants and secondary messengers in the cytosol

To determine whether SCC25, H596, OE21 and Detroit 562 cells actively release type I/III IFNs

in cell culture supernatants compared to other airway-derived cell lines, 5x10^5 cells were plated

in 6-well dishes. At 24h post-plating, culture supernatants were collected, centrifuged at 500x*g* to

remove cell debris and 500 µl of the resultant supernatant was inoculated on 2x10^5 THP-1 cells

(or its derivatives thereof, plated in 500 µl RPMI) in 24-well plates. Total RNA was isolated at 24h

post-inoculation by Trizol and subjected to qRT-PCR as detailed above. In a parallel set of

experiments, 5x10^5 cells were plated in 6-well dishes one day prior to co-culturing. On the day of

co-culturing, spent cell culture medium was removed, cells washed with PBS to remove cell debris

and unattached cells and 1x10^6 THP-1 cells added on top. 24h post co-culturing, THP-1 cells that

remain in suspension were gently removed and subjected to RNA extraction and qRT-PCR.

Attachment properties of airway-derived cells were visually assessed by microscopy and we

found no major impact in cell morphology or viability following co-culturing.

To assess the presence of cGAS-derived secondary messengers in airway-derived cells, THP-1

and THP-1 cGAS KO and THP-1 STING KO cells were inoculated with post-nuclear supernatants

isolated as follows. In brief, airway-derived cells grown at confluency in 10-cm culture dishes were

trypsinized, collected in culture media, washed with 1xPBS and resuspended in 1 ml of hypotonic

buffer (10 mM Tris-Cl pH 8.0, 10 mM KCl, 1 mM EDTA supplemented with complete protease

inhibitors (Roche)). Following 10 min incubation on ice, cells were dounce-homogenized for 40

strokes and lysates were centrifuged at 1000 x *g* at 4°C for 5 min. 150 µl of resultant PNS was

added on $2x10^5$ THP-1 cells in 24-well plates (alongside with controls including 2'3'-cGAMP and

2'2'-cGAMP) and IFN-β expression analyzed by qRT-PCR following RNA extraction by Trizol as

detailed above.

Cell culture supernatants were also subjected to an IFN-β ELISA assay (InvivoGen, #luex-

hinfbv2) or IFN-λ ELISA assay (DY1598B-05 from R&D systems) following the manufacturer's

instructions. The concentration of IFNs in cell culture supernatants was derived based on a

standard curve obtained from serial dilutions of recombinant IFNs provided by the ELISA assay.

Analysis of cytosolic mtDNA

Presence of cytosolic mtDNA in the cell line panel was analyzed as described before[93]. In brief,

cells grown to near confluency in 10-cm dishes were collected by trypsin, washed with 1xPBS

and sequentially lysed in 500 μl of buffers containing digitonin, NP-40 and SDS that allow

permeabilization of the plasma membrane, cellular membranes including mitochondrial and

nuclear membrane, respectively. 50 μl of the extract was proteinase K treated and DNA extracted

by phenol:chloroform:isoamyl alcohol extraction. Resultant DNA was analyzed by qPCR using

KCNJ as the nuclear marker and MT-ND1 and MT-D-loop as mitochondrial markers. Abundance

of mtDNA in the cytosol was normalized relative to its total abundance in each cell type as

described in detail before[93].

Gene expression analysis in infected vs. bystander SCC25 cells

$1x10^7$ SCC25-STING KO cells were infected with SARS-CoV-2 mNG at MOI: 1 i.u./cell for 72 hrs.

Cells were subsequently fixed with 4% paraformaldehyde and single-cell sorted on a BD FACS

Aria III platform. Infected (mNG+) and bystander (mNG-) cells were lysed in 1X Proteinase K

buffer (100 mM Tris-pH7.5, 50 mM NaCl, 10 mM EDTA, 1% SDS) supplemented with 20 μg of

Proteinase K by incubation at 55 °C for 1h by constant agitation on a thermal mixer. RNA was

extracted by phenol:chloroform:isoamyl alcohol and pelleted by ammonium acetate and ethanol.

Pelleted RNA was subjected to qRT-PCR as above.

RNA-seq and single-cell RNA-seq data analysis

For heatmap analysis of the interferon response pathway in our cell line cohort, RNA-seq TPM

data for the Cancer Cell Line Encyclopedia (CCLE) was downloaded from the DepMap portal

(DepMap Public 18Q3). Gene sets for the interferon response pathway were extracted from

MsigDB's   lists   of   HALLMARK_INTERFERON_GAMMA_RESPONSE   and

HALLMARK_INTERFERON_ALPHA_RESPONSE genes. Hierarchical clustering and figure

generation was performed with the ComplexHeatmap R package. For single-cell expression

levels in healthy human airways, normalized counts and cell type metadata were downloaded

from a publicly available single-cell study [94].

For RNA-seq analysis of SCC25, H596, OE21, Detroit 562 cell lines and their STING CRISPR

derivatives, total RNA was harvested from cells grown on 6-well plates by Trizol (Life

Technologies) following manufacturer's instructions. 4 μg of total RNA (from n=4 replicates) was

subjected to Illumina stranded mRNA library generation kit and sequenced on an Illumina Nextseq

500 platform at 1x75. Resultant RNA-seq reads were aligned to human genome (hg19) using the

STAR aligner (add ref) with a mismatch rate threshold of 4% (--outFilterMismatchNoverLmax

0.04). "featureCounts", a read summarization program, was then used to annotate the mapped

reads. RNA-seq counts generated by featureCounts were processed using the edgeR package.

The data was filtered with "filterByExpr" with default settings, normalized, and transformed to

counts per million (CPM). Genes with CPM values greater than 1 were kept, and their CPM values

were log10 transformed. These log10-transformed CPM values were then used to perform PCA

using "prcomp" function in R. RNA-seq data on WT and STING knockout airway cells have been

deposited to the GEO Server under accession number GSE271679.

The "exactTest" function from edgeR was used to test for genewise differential expression

between WT and KO samples of each cell line using log2 CPM values, yielding logFC, P-value

and FDR. For the full heatmap presented in Fig. S5, both upregulated and downregulated genes

(|logFC| > 1) with FDR < 0.05 were considered. Z-scores of log2-transformed CPM values for all

selected genes were calculated and used for consensus clustering with the

"ConsensusClusterPlus" package. The "ComplexHeatmap" package was then used to generate

the heatmap.

For the heatmap of selected genes in Fig. 5, only those from the human gene sets

"HALLMARK_INFLAMMATORY_RESPONSE,"

"HALLMARK_INTERFERON_ALPHA_RESPONSE,"   and

"HALLMARK_INTERFERON_GAMMA_RESPONSE" retrieved from Gene Set Enrichment

Analysis (GSEA) were included. Differential expression results were filtered to keep only

downregulated genes (logFC < -1) and those with FDR < 0.05.

Enrichment Heatmap for gene sets: Overrepresentation analysis was performed with the enricher

function from the "ClusterProfiler" package, using CPM values obtained from previous steps.

Gene sets that were retrieved from Molecular Signatures Database (MSigDB) of GSEA were

selected manually and plotted using the "ComplexHeatmap" package. For enricher function, a

cutoff of q < 0.01 was used to define overrepresented gene sets, the minimum number of genes

in the set was 10 and the p-value adjustments for multiple comparisons were set to be "fdr". The

-log10-transformed q-values were then calculated and used for plotting the enrichment heatmap.

Variant Calling: VCF files were generated using BCFtools with mapped reads. SNPs (single

nucleotide polymorphisms) from the VCF files were filtered using the "GATK" package based on

the following criteria: QUAL ≥ 30.0, DP ≥ 10.0, QD ≥ 2.0, and SOR ≤ 4.0. Reads that failed to

meet these criteria were filtered out. SnpEff was then used to annotate the remaining SNPs.

Statistical Analysis

Generally, experiments were repeated with at least two biological replicates, represented by n.

Each plot includes points for individual biological replicates and mean ± SEM error bars unless

otherwise specified. GraphPad Prism 9 software was used for statistical analysis. Statistical

parameters and details for each experiment are reported in respective figure legends.

DATA AVAILABILITY STATEMENT

RNA-seq data on WT and STING knockout airway cells have been deposited to the Gene

Expression Omnibus Database under accession number GSE271679 and are available at the

following URL: https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE271679. Source data

are provided with this paper.

CODE AVAILABILITY STATEMENT

Processing of the sequencing data are done by open access software and thoroughly explained

in the Methods section. Any additional information required to reanalyze the data reported in this

paper is available from the lead contact upon request.

REFERENCES

Chen, N. *et al.* Viral strategies to antagonize the host antiviral innate immunity: an indispensable research direction for emerging virus-host interactions. *Emerg Microbes Infect* **13**, 2341144 (2024). https://doi.org/10.1080/22221751.2024.2341144

Le Pen, J. & Rice, C. M. The antiviral state of the cell: lessons from SARS-CoV-2. *Curr Opin Immunol* **87**, 102426 (2024). https://doi.org/10.1016/j.coi.2024.102426

Sievers, B. L., Cheng, M. T. K., Csiba, K., Meng, B. & Gupta, R. K. SARS-CoV-2 and innate immunity: the good, the bad, and the "goldilocks". *Cell Mol Immunol* **21**, 171-183 (2024). https://doi.org/10.1038/s41423-023-01104-y

Walls, A. C. *et al.* Structure, Function, and Antigenicity of the SARS-CoV-2 Spike Glycoprotein. *Cell* **181**, 281-292 e286 (2020). https://doi.org/10.1016/j.cell.2020.02.058

Letko, M., Marzi, A. & Munster, V. Functional assessment of cell entry and receptor usage for SARS-CoV-2 and other lineage B betacoronaviruses. *Nat Microbiol* **5**, 562-569 (2020). https://doi.org/10.1038/s41564-020-0688-y

Hoffmann, M. *et al.* SARS-CoV-2 Cell Entry Depends on ACE2 and TMPRSS2 and Is Blocked by a Clinically Proven Protease Inhibitor. *Cell* **181**, 271-280 e278 (2020). https://doi.org/10.1016/j.cell.2020.02.052

Zhou, P. *et al.* A pneumonia outbreak associated with a new coronavirus of probable bat origin. *Nature* **579**, 270-273 (2020). https://doi.org/10.1038/s41586-020-2012-7

Hikmet, F. *et al.* The protein expression profile of ACE2 in human tissues. *Mol Syst Biol* **16**, e9610 (2020). https://doi.org/10.15252/msb.20209610

Aguiar, J. A. *et al.* Gene expression and in situ protein profiling of candidate SARS-CoV-2 receptors in human airway epithelial cells and lung tissue. *Eur Respir J* **56** (2020). https://doi.org/10.1183/13993003.01123-2020

Hamming, I. *et al.* Tissue distribution of ACE2 protein, the functional receptor for SARS coronavirus. A first step in understanding SARS pathogenesis. *J Pathol* **203**, 631-637 (2004). https://doi.org/10.1002/path.1570

To, K. F. & Lo, A. W. Exploring the pathogenesis of severe acute respiratory syndrome (SARS): the tissue distribution of the coronavirus (SARS-CoV) and its putative receptor, angiotensin-converting enzyme 2 (ACE2). *J Pathol* **203**, 740-743 (2004). https://doi.org/10.1002/path.1597

Chen, Z. *et al.* SARS-CoV-2 immunity in animal models. *Cell Mol Immunol* **21**, 119-133 (2024). https://doi.org/10.1038/s41423-023-01122-w

Behboudi, E. *et al.* SARS-CoV-2 mechanisms of cell tropism in various organs considering host factors. *Heliyon* **10**, e26577 (2024). https://doi.org/10.1016/j.heliyon.2024.e26577

Lim, S., Zhang, M. & Chang, T. L. ACE2-Independent Alternative Receptors for SARS-CoV-2. *Viruses* **14** (2022). https://doi.org/10.3390/v14112535

Loske, J. *et al.* Pre-activated antiviral innate immunity in the upper airways controls early SARS-CoV-2 infection in children. *Nat Biotechnol* **40**, 319-324 (2022). https://doi.org/10.1038/s41587-021-01037-9

Abt, M. C. *et al.* Commensal bacteria calibrate the activation threshold of innate antiviral immunity. *Immunity* **37**, 158-170 (2012). https://doi.org/10.1016/j.immuni.2012.04.011

Brown Harding, H. *et al.* Candida albicans extracellular vesicles trigger type I IFN signalling via cGAS and STING. *Nat Microbiol* (2024). https://doi.org/10.1038/s41564-023-01546-0

Di Domizio, J. *et al.* The commensal skin microbiota triggers type I IFN-dependent innate repair responses in injured skin. *Nat Immunol* **21**, 1034-1045 (2020). https://doi.org/10.1038/s41590-020-0721-6

19   Gutierrez-Merino, J., Isla, B., Combes, T., Martinez-Estrada, F. & Maluquer De Motes,
C. Beneficial bacteria activate type-I interferon production via the intracellular cytosolic
sensors STING and MAVS. *Gut Microbes* **11**, 771-788 (2020).
https://doi.org/10.1080/19490976.2019.1707015
20   Lima-Junior, D. S. *et al.* Endogenous retroviruses promote homeostatic and
inflammatory responses to the microbiota. *Cell* **184**, 3794-3811 e3719 (2021).
https://doi.org/10.1016/j.cell.2021.05.020
21   Schaupp, L. *et al.* Microbiota-Induced Type I Interferons Instruct a Poised Basal State of
Dendritic Cells. *Cell* **181**, 1080-1096 e1019 (2020).
https://doi.org/10.1016/j.cell.2020.04.022
22   Wypych, T. P., Wickramasinghe, L. C. & Marsland, B. J. The influence of the microbiome
on respiratory health. *Nat Immunol* **20**, 1279-1290 (2019).
https://doi.org/10.1038/s41590-019-0451-9
23   Dickson, R. P., Erb-Downward, J. R., Martinez, F. J. & Huffnagle, G. B. The Microbiome
and the Respiratory Tract. *Annu Rev Physiol* **78**, 481-504 (2016).
https://doi.org/10.1146/annurev-physiol-021115-105238
24   Pattaroni, C. *et al.* Early-Life Formation of the Microbial and Immunological Environment
of the Human Airways. *Cell Host Microbe* **24**, 857-865 e854 (2018).
https://doi.org/10.1016/j.chom.2018.10.019
25   Lynch, S. V. & Pedersen, O. The Human Intestinal Microbiome in Health and Disease. *N*
Engl J Med **375**, 2369-2379 (2016). https://doi.org/10.1056/NEJMra1600266
26   Wang, B. *et al.* Alterations in microbiota of patients with COVID-19: potential
mechanisms and therapeutic interventions. *Signal Transduct Target Ther* **7**, 143 (2022).
https://doi.org/10.1038/s41392-022-00986-0
27   Sulaiman, I. *et al.* Microbial signatures in the lower airways of mechanically ventilated
COVID-19 patients associated with poor clinical outcome. *Nat Microbiol* **6**, 1245-1258
(2021). https://doi.org/10.1038/s41564-021-00961-5
28   Llorens-Rico, V. *et al.* Clinical practices underlie COVID-19 patient respiratory
microbiome composition and its interactions with the host. *Nat Commun* **12**, 6243
(2021). https://doi.org/10.1038/s41467-021-26500-8
29   Zuo, T. *et al.* Alterations in Fecal Fungal Microbiome of Patients With COVID-19 During
Time of Hospitalization until Discharge. *Gastroenterology* **159**, 1302-1310 e1305 (2020).
https://doi.org/10.1053/j.gastro.2020.06.048
30   Zuo, T. *et al.* Alterations in Gut Microbiota of Patients With COVID-19 During Time of
Hospitalization. *Gastroenterology* **159**, 944-955 e948 (2020).
https://doi.org/10.1053/j.gastro.2020.05.048
31   Puray-Chavez, M. *et al.* Systematic analysis of SARS-CoV-2 infection of an ACE2-
negative human airway cell. *Cell Rep* **36**, 109364 (2021).
https://doi.org/10.1016/j.celrep.2021.109364
32   Sampaio, N. G. *et al.* The RNA sensor MDA5 detects SARS-CoV-2 infection. *Sci Rep*
11, 13638 (2021). https://doi.org/10.1038/s41598-021-92940-3
33   Rebendenne, A. *et al.* SARS-CoV-2 triggers an MDA-5-dependent interferon response
which is unable to control replication in lung epithelial cells. *J Virol* (2021).
https://doi.org/10.1128/JVI.02415-20
34   Yin, X. *et al.* MDA5 Governs the Innate Immune Response to SARS-CoV-2 in Lung
Epithelial Cells. *Cell Rep* **34**, 108628 (2021).
https://doi.org/10.1016/j.celrep.2020.108628
35   Kouwaki, T., Nishimura, T., Wang, G. & Oshiumi, H. RIG-I-Like Receptor-Mediated
Recognition of Viral Genomic RNA of Severe Acute Respiratory Syndrome Coronavirus-
2 and Viral Escape From the Host Innate Immune Responses. *Front Immunol* **12**,
700926 (2021). https://doi.org/10.3389/fimmu.2021.700926

36 Thorne, L. G. *et al.* SARS-CoV-2 sensing by RIG-I and MDA5 links epithelial infection to
macrophage inflammation. *EMBO J* **40**, e107826 (2021).
https://doi.org/10.15252/embj.2021107826
37 Yang, D. M., Geng, T. T., Harrison, A. G. & Wang, P. H. Differential roles of RIG-I like
receptors in SARS-CoV-2 infection. *Mil Med Res* **8**, 49 (2021).
https://doi.org/10.1186/s40779-021-00340-5
38 Blanco-Melo, D. *et al.* Imbalanced Host Response to SARS-CoV-2 Drives Development
of COVID-19. *Cell* **181**, 1036-1045 e1039 (2020).
https://doi.org/10.1016/j.cell.2020.04.026
39 Lei, X. *et al.* Activation and evasion of type I interferon responses by SARS-CoV-2. *Nat
Commun* **11**, 3810 (2020). https://doi.org/10.1038/s41467-020-17665-9
40 Hatton, C. F. *et al.* Delayed induction of type I and III interferons mediates nasal
epithelial cell permissiveness to SARS-CoV-2. *Nat Commun* **12**, 7092 (2021).
https://doi.org/10.1038/s41467-021-27318-0
41 Chu, H. *et al.* Comparative replication and immune activation profiles of SARS-CoV-2
and SARS-CoV in human lungs: an ex vivo study with implications for the pathogenesis
of COVID-19. *Clin Infect Dis* (2020). https://doi.org/10.1093/cid/ciaa410
42 Stukalov, A. *et al.* Multi-level proteomics reveals host-perturbation strategies of SARS-
CoV-2 and SARS-CoV. *bioRxiv*, 2020.2006.2017.156455 (2020).
https://doi.org/10.1101/2020.06.17.156455
43 Hadjadj, J. *et al.* Impaired type I interferon activity and inflammatory responses in severe
COVID-19 patients. *Science* **369**, 718-724 (2020).
https://doi.org/10.1126/science.abc6027
44 Galani, I. E. *et al.* Untuned antiviral immunity in COVID-19 revealed by temporal type I/III
interferon patterns and flu comparison. *Nat Immunol* **22**, 32-40 (2021).
https://doi.org/10.1038/s41590-020-00840-x
45 Bastard, P. *et al.* Autoantibodies against type I IFNs in patients with life-threatening
COVID-19. *Science* **370** (2020). https://doi.org/10.1126/science.abd4585
46 Goenka, A. *et al.* Young infants exhibit robust functional antibody responses and
restrained IFN-gamma production to SARS-CoV-2. *Cell Rep Med* **2**, 100327 (2021).
https://doi.org/10.1016/j.xcrm.2021.100327
47 Hoffmann, M. *et al.* Evidence for an ACE2-Independent Entry Pathway That Can Protect
from Neutralization by an Antibody Used for COVID-19 Therapy. *mBio* **13**, e0036422
(2022). https://doi.org/10.1128/mbio.00364-22
48 Guo, K., Barrett, B. S., Mickens, K. L., Hasenkrug, K. J. & Santiago, M. L. Interferon
Resistance of Emerging SARS-CoV-2 Variants. *bioRxiv* (2021).
https://doi.org/10.1101/2021.03.20.436257
49 Danziger, O., Patel, R. S., DeGrace, E. J., Rosen, M. R. & Rosenberg, B. R. Inducible
CRISPR activation screen for interferon-stimulated genes identifies OAS1 as a SARS-
CoV-2 restriction factor. *PLoS Pathog* **18**, e1010464 (2022).
https://doi.org/10.1371/journal.ppat.1010464
50 Martin-Sancho, L. *et al.* Functional landscape of SARS-CoV-2 cellular restriction. *Mol
Cell* **81**, 2656-2668 e2658 (2021). https://doi.org/10.1016/j.molcel.2021.04.008
51 Wickenhagen, A. *et al.* A prenylated dsRNA sensor protects against severe COVID-19.
Science **374**, eabj3624 (2021). https://doi.org/10.1126/science.abj3624
52 Haag, S. M. *et al.* Targeting STING with covalent small-molecule inhibitors. *Nature* **559**,
269-273 (2018). https://doi.org/10.1038/s41586-018-0287-8
53 Hong, Z. *et al.* STING inhibitors target the cyclic dinucleotide binding pocket. *Proc Natl
Acad Sci U S A* **118** (2021). https://doi.org/10.1073/pnas.2105465118
54 Li, M. *et al.* Pharmacological activation of STING blocks SARS-CoV-2 infection. *Sci
Immunol* **6** (2021). https://doi.org/10.1126/sciimmunol.abi9007

55   Ablasser, A. *et al.* TREX1 deficiency triggers cell-autonomous immunity in a cGAS-
dependent manner. *J Immunol* **192**, 5993-5997 (2014).
https://doi.org/10.4049/jimmunol.1400737
56   Stetson, D. B., Ko, J. S., Heidmann, T. & Medzhitov, R. Trex1 prevents cell-intrinsic
initiation of autoimmunity. *Cell* **134**, 587-598 (2008).
https://doi.org/10.1016/j.cell.2008.06.032
57   Rongvaux, A. *et al.* Apoptotic caspases prevent the induction of type I interferons by
mitochondrial DNA. *Cell* **159**, 1563-1577 (2014).
https://doi.org/10.1016/j.cell.2014.11.037
58   West, A. P. *et al.* Mitochondrial DNA stress primes the antiviral innate immune response.
Nature **520**, 553-557 (2015). https://doi.org/10.1038/nature14156
59   Froechlich, G. *et al.* The common H232 STING allele shows impaired activities in DNA
sensing, susceptibility to viral infection, and in monocyte cell function, while the HAQ
variant possesses wild-type properties. *Sci Rep* **13**, 19541 (2023).
https://doi.org/10.1038/s41598-023-46830-5
60   Kennedy, R. B. *et al.* Polymorphisms in STING Affect Human Innate Immune Responses
to Poxviruses. *Front Immunol* **11**, 567348 (2020).
https://doi.org/10.3389/fimmu.2020.567348
61   Kazmierski, J. *et al.* A Baseline Cellular Antiviral State Is Maintained by cGAS and Its
Most Frequent Naturally Occurring Variant rs610913. *J Immunol* **209**, 535-547 (2022).
https://doi.org/10.4049/jimmunol.2100685
62   Decout, A., Katz, J. D., Venkatraman, S. & Ablasser, A. The cGAS-STING pathway as a
therapeutic target in inflammatory diseases. *Nat Rev Immunol* **21**, 548-569 (2021).
https://doi.org/10.1038/s41577-021-00524-z
63   Contreras-Galindo, R., Dube, D., Fujinaga, K., Kaplan, M. H. & Markovitz, D. M.
Susceptibility of Human Endogenous Retrovirus Type K to Reverse Transcriptase
Inhibitors. *J Virol* **91** (2017). https://doi.org/10.1128/JVI.01309-17
64   Hou, Y. J. *et al.* SARS-CoV-2 Reverse Genetics Reveals a Variable Infection Gradient in
the Respiratory Tract. *Cell* **182**, 429-446 e414 (2020).
https://doi.org/10.1016/j.cell.2020.05.042
65   Ge, Z. & Ding, S. Regulation of cGAS/STING signaling and corresponding immune
escape strategies of viruses. *Front Cell Infect Microbiol* **12**, 954581 (2022).
https://doi.org/10.3389/fcimb.2022.954581
66   Hertzog, J. & Rehwinkel, J. Regulation and inhibition of the DNA sensor cGAS. *EMBO*
Rep **21**, e51345 (2020). https://doi.org/10.15252/embr.202051345
67   Mackenzie, K. J. *et al.* cGAS surveillance of micronuclei links genome instability to
innate immunity. *Nature* **548**, 461-465 (2017). https://doi.org/10.1038/nature23449
68   Li, H., Zhou, F. & Zhang, L. STING, a critical contributor to SARS-CoV-2
immunopathology. *Signal Transduct Target Ther* **7**, 106 (2022).
https://doi.org/10.1038/s41392-022-00967-3
69   Domizio, J. D. *et al.* The cGAS-STING pathway drives type I IFN immunopathology in
COVID-19. *Nature* **603**, 145-151 (2022). https://doi.org/10.1038/s41586-022-04421-w
70   Zhou, Z. *et al.* Sensing of cytoplasmic chromatin by cGAS activates innate immune
response in SARS-CoV-2 infection. *Signal Transduct Target Ther* **6**, 382 (2021).
https://doi.org/10.1038/s41392-021-00800-3
71   Humphries, F. *et al.* A diamidobenzimidazole STING agonist protects against SARS-
CoV-2 infection. *Sci Immunol* **6** (2021). https://doi.org/10.1126/sciimmunol.abi9002
72   Liu, W. *et al.* Activation of STING Signaling Pathway Effectively Blocks Human
Coronavirus Infection. *J Virol* **95** (2021). https://doi.org/10.1128/JVI.00490-21

73 Ding, S. & Liang, T. J. Is SARS-CoV-2 Also an Enteric Pathogen With Potential Fecal-
Oral Transmission? A COVID-19 Virological and Clinical Review. *Gastroenterology* **159**,
53-61 (2020). https://doi.org/10.1053/j.gastro.2020.04.052
74 Durairajan, S. S. K. *et al.* Gastrointestinal Manifestations of SARS-CoV-2: Transmission,
Pathogenesis, Immunomodulation, Microflora Dysbiosis, and Clinical Implications.
Viruses **15** (2023). https://doi.org/10.3390/v15061231
75 Marino, G. *et al.* STING is redundant for host defense and pathology of COVID-19-like
disease in mice. *Life Sci Alliance* **6** (2023). https://doi.org/10.26508/lsa.202301997
76 Han, L. *et al.* SARS-CoV-2 ORF10 antagonizes STING-dependent interferon activation
and autophagy. *J Med Virol* **94**, 5174-5188 (2022). https://doi.org/10.1002/jmv.27965
77 Su, J. *et al.* SARS-CoV-2 ORF3a inhibits cGAS-STING-mediated autophagy flux and
antiviral function. *J Med Virol* **95**, e28175 (2023). https://doi.org/10.1002/jmv.28175
78 Rui, Y. *et al.* Unique and complementary suppression of cGAS-STING and RNA
sensing- triggered innate immune responses by SARS-CoV-2 proteins. *Signal Transduct*
Target Ther **6**, 123 (2021). https://doi.org/10.1038/s41392-021-00515-5
79 Schoggins, J. W. Interferon-Stimulated Genes: What Do They All Do? *Annu Rev Virol* **6**,
567-584 (2019). https://doi.org/10.1146/annurev-virology-092818-015756
80 Lazear, H. M., Schoggins, J. W. & Diamond, M. S. Shared and Distinct Functions of
Type I and Type III Interferons. *Immunity* **50**, 907-923 (2019).
https://doi.org/10.1016/j.immuni.2019.03.025
81 Sa Ribero, M., Jouvenet, N., Dreux, M. & Nisole, S. Interplay between SARS-CoV-2 and
the type I interferon response. *PLoS Pathog* **16**, e1008737 (2020).
https://doi.org/10.1371/journal.ppat.1008737
82 Setaro, A. C. & Gaglia, M. M. All hands on deck: SARS-CoV-2 proteins that block early
anti-viral interferon responses. *Curr Res Virol Sci* **2**, 100015 (2021).
https://doi.org/10.1016/j.crviro.2021.100015
83 Triana, S. *et al.* Single-cell analyses reveal SARS-CoV-2 interference with intrinsic
immune response in the human gut. *Mol Syst Biol* **17**, e10232 (2021).
https://doi.org/10.15252/msb.202110232
84 Ravindra, N. G. *et al.* Single-cell longitudinal analysis of SARS-CoV-2 infection in human
airway epithelium identifies target cells, alterations in gene expression, and cell state
changes. *PLoS Biol* **19**, e3001143 (2021). https://doi.org/10.1371/journal.pbio.3001143
85 Case, J. B. *et al.* Neutralizing Antibody and Soluble ACE2 Inhibition of a Replication-
Competent VSV-SARS-CoV-2 and a Clinical Isolate of SARS-CoV-2. *Cell Host Microbe*
28, 475-485 e475 (2020). https://doi.org/10.1016/j.chom.2020.06.021
86 Eschbach, J. E. *et al.* HIV-1 capsid stability and reverse transcription are finely balanced
to minimize sensing of reverse transcription products via the cGAS-STING pathway.
mBio **15**, e0034824 (2024). https://doi.org/10.1128/mbio.00348-24
87 Horani, A. *et al.* Whole-exome capture and sequencing identifies HEATR2 mutation as a
cause of primary ciliary dyskinesia. *Am J Hum Genet* **91**, 685-693 (2012).
https://doi.org/10.1016/j.ajhg.2012.08.022
88 You, Y., Richer, E. J., Huang, T. & Brody, S. L. Growth and differentiation of mouse
tracheal epithelial cells: selection of a proliferative population. *Am J Physiol Lung Cell*
Mol Physiol **283**, L1315-1321 (2002). https://doi.org/10.1152/ajplung.00169.2002
89 Horani, A. *et al.* Establishment of the early cilia preassembly protein complex during
motile ciliogenesis. *Proc Natl Acad Sci U S A* **115**, E1221-E1228 (2018).
https://doi.org/10.1073/pnas.1715915115
90 Xie, X. *et al.* An Infectious cDNA Clone of SARS-CoV-2. *Cell Host Microbe* **27**, 841-848
e843 (2020). https://doi.org/10.1016/j.chom.2020.04.004

91 Case, J. B., Bailey, A. L., Kim, A. S., Chen, R. E. & Diamond, M. S. Growth, detection,
quantification, and inactivation of SARS-CoV-2. *Virology* **548**, 39-48 (2020).
https://doi.org/10.1016/j.virol.2020.05.015
92 Shema Mugisha, C., Vuong, H. R., Puray-Chavez, M. & Kutluay, S. B. A facile Q-RT-
PCR assay for monitoring SARS-CoV-2 growth in cell culture. *bioRxiv* (2020).
https://doi.org/10.1101/2020.06.26.174698
93 Bryant, J. D., Lei, Y., VanPortfliet, J. J., Winters, A. D. & West, A. P. Assessing
Mitochondrial DNA Release into the Cytosol and Subsequent Activation of Innate
Immune-related Pathways in Mammalian Cells. *Curr Protoc* **2**, e372 (2022).
https://doi.org/10.1002/cpz1.372
94 Deprez, M. *et al.* A Single-Cell Atlas of the Human Healthy Airways. *Am J Respir Crit*
Care Med **202**, 1636-1645 (2020). https://doi.org/10.1164/rccm.201911-2199OC
1002

ACKNOWLEDGEMENTS

This work was supported in part by a V Foundation grant (T2014-009) to M.B. Major, a T32 training grant (T32CA009547-34) to K.M.L., a F31 grant to J.E.E. (AI167695). We thank the Miner lab for STING CRISPR plasmid and the Molecular Microbiology Imaging Facility (Wandy L. Beatty) for help with confocal microscopy and data analysis. We thank members of the Lopez, Lenschow, Diamond, Orvedahl and Boon labs for reagents and critical input. We opted to cite recent review articles where appropriate and apologize to colleagues whose work we were unable to cite due to citation limits.

AUTHOR CONTRIBUTIONS

M. P-C., K.M.L., M.B.M., D.G. and S.B.K. conceptualized the study; M. P-C., J.E.E., K.M.L., S.D., M.B.M., D.G., S.L.B. and S.B.K. designed the methodology. M. P-C., J.E.E., M.X., K.M.L., J.P., J.X., Z.Z.., S.M., Q.W., D.Q.L., S.D., G.H. and S.B.K performed the experiments. Q.Z., R.J. and D.G. performed statistical and bioinformatics analysis. M. P-C., M.B.M., D.G. and S.B.K. wrote the manuscript with input from all the authors.

COMPETING INTERESTS STATEMENT

The authors declare no competing interests.

 FIGURE LEGENDS

 Figure 1. **SARS-CoV-2 replication is blocked at a post-entry stage in a subset of airway-**

 derived cell lines that endogenously express ACE2. (a) The indicated airway-derived cell lines

 were inoculated with WT SARS-CoV-2 (2019-nCoV/USA-WA1/2020) at a MOI: 0.15 i.u./cell. RT-

 qPCR analysis of cell-associated SARS-CoV-2 N sgRNA (copies/cell) at 4 and 72 hpi is shown.

 Data show the average of 2 independent experiments, errors bars denote the range. **(b)** Focus

 forming assay performed on culture supernatants of the indicated cells infected with SARS-CoV-

 2 for 72 hpi (from panel A). Data show focus forming units per mL (FFU/mL, log transformed) from

 two independent experiments, error bars show the SEM. **(c)** Polyclonal pools of ACE2 knockout

 (ACE2-KO) and control cell lines transduced with a non-targeting sgRNA (NT) were infected with

 WT SARS-CoV-2 at a MOI: 2 i.u./cell. RT-qPCR analysis of cell-associated viral RNA (sgRNA N)

 at 72 hpi is shown from two biological replicates. Data show the mean, error bars show the SEM,

 p< 0.01 where significance was assessed by multiple unpaired t-tests. **(d) Polyclonal pools of

 ACE2 KO and non-targeting control (NT) cell lines were infected with WT SARS-CoV-2 at a MOI:

 2 i.u./cell. In situ hybridization of incoming viral RNA (green) at 2 hpi was performed as detailed

 in Methods. Nuclear DAPI staining is shown in blue. **(e)** Quantification of data presented in Panel

 D. Puncta of SARS-CoV-2 RNA was counted in ~200 cells per cell line from two independent

 experiments. The average number of RNA puncta per condition is shown in the graph. Source

 data are provided as a Source Data file.

 Figure 2. **ACE2(high) airway-derived cell lines that are resistant to SARS-CoV-2 replication**

 express high baseline levels of type I IFN pathway genes. (a) Hierarchical clustering of IFN

 response pathway RNA expression levels downloaded from CCLE. The heatmap displays z-

 scored $\log_2$(TPM) values. **(b-e)** RT-qPCR analysis of representative ISGs including *IFIT1, MX1,*

 IRF9 and *STAT1* in uninfected cells. Expression levels are normalized relative to Calu-3 cells (set

 to 1). Data show the mean from n=2 (H596 and Calu-3) or 4 (other cells) independent biological

replicates, error bars denote SEM. **(f)** Immunoblot showing pSTAT1 (Y701 and S727), STAT1, IRF7, IRF9, MX1, IFIT1 and Vinculin levels across airway-derived cell lines (not infected). Blots are representative of two independent experiments. **(g, h)** Airway cell lines were infected with SARS-CoV-2 at a MOI of 2 i.u./cell and expression of *IFIT1* and *IFIT2* in was analyzed by RT-qPCR at 4 and 72 hpi. Y-axes indicate ISG fold induction at 72 hpi relative to 4hpi. Data show the mean from n=3 independent replicates, errors bars show the SEM. Source data are provided as a Source Data file.

Figure 3. **Basally active type I IFN pathway limits SARS-CoV-2 replication in a subset of ACE2(high) cells. (a, b)** SCC25, H596, OE21, Detroit 562 and Calu-3 cells were pretreated with 1 μM ruxolitinib for 24 hours. *IFIT1* (**a**) and *MX1* (**b**) expression was analyzed by RT-qPCR and expression levels are shown relative to untreated Calu-3 cells (set to 1). Data show the mean from n=2 (H596 and Calu-3) and 4 (other cells) independent biological replicates, error bars show the SEM. **(c)** SCC25, H596, OE21 and Detroit 562 cells were pretreated with DMSO (mock) or 1 μM ruxolitinib for 24 hours and infected with SARS-CoV-2 at a MOI of 2 i.u./cell in presence of DMSO or 1 μM ruxolitinib. RT-qPCR analysis shows cell-associated viral RNA levels at 72 hpi. Data show the mean from n=4 independent replicates, error bars show the SEM. **(d-g)** Polyclonal populations of SCC25 cells knocked out (KO) for IFNAR (**d**) or STAT1 (**e**) using two independent sgRNAs or transduced with a non-targeting (NT) control and SCC25 cells transfected with 3 separate siRNAs targeting STAT2 (**f**), IRF9 (**g**), or a non-targeting control (NT) were infected with SARS-CoV-2 at a MOI of 2 i.u./cell. Cell-associated viral RNA was analyzed by RT-qPCR at 72 hpi. Y-axes indicate the relative expression ratio between knockdown (KD) or knockout (KO) and the respective NT samples. Data display the mean of n=5 (**d, e**) and n=6 (**f, g**) independent replicates, error bars denote the SEM. Source data are provided as a Source Data file.

Figure 4. A constitutively active cGAS-STING pathway limits SARS-CoV-2 replication in

SCC25 cells. (a) SCC25 cells transfected with siRNAs or a non-targeting control (NT) were

infected with SARS-CoV-2 at an MOI of 2 i.u./cell for 72 h. Data show the ratio of cell-associated

viral RNA between knockdown (KD) and NT samples. Data display the mean of 2 (NLRP1-3,

NLRP3-1, NLRP3-2, NLRC5-1, NLRC5-2) or 4 (other targets) biological replicates, with error bars

representing SEM. **(b)** SCC25 cGAS, STING, TBK1 and IRF3 KO cells or NT controls were

infected with SARS-CoV-2 at MOI: 2 i.u./cell for 72h. Cell-associated viral N RNA from 5 replicates

is shown, error bars show the SEM. $p < 0.0001$ significance (compared to NT-1) was assessed

by a one-way ANOVA with Dunnett correction. **(c)** Immunoblots (representative of n=2) show

SARS-CoV-2 N, cGAS, STING, TBK1, IRF3 and β-actin expression levels in SCC25 cells from

panel B. **(d)** SCC25 STING KO cells were infected with SARS-CoV-2-mNG at a MOI:2 i.u./cell.

NG-positive cells were enumerated by flow cytometry at 24, 48 and 72 hpi and represented as

percentage of total population. Data show the mean of n=5 independent experiments, error bars

denote the SEM. **(e)** SCC25 STING KO and NT control cells were pretreated for 24 hours and

infected (MOI:2 i.u./cell) in the absence (DMSO) and presence of 1 μM ruxolitinib with SARS-

CoV-2-mNG. NG-positive cells were enumerated by flow cytometry at 72 hpi and represented as

percentage of total population. Data show the mean of n=4 independent experiments, error bars

denote the SEM. *P* values are assessed by two-way ANOVA and Šidák multiple test correction.

(**f**) Cells ectopically expressing ACE2 were infected at a MOI: 0.1 i.u./cell with SARS-CoV-2 WT.

Cell-associated SARS-CoV-2 RNA at 2 and 24 hpi is shown from n=2 replicates. Data show the

mean, error bars denote SEM. (**g, h**) SCC25 (**g**) and OE21 (**h**) cells were transfected with 2

distinct siRNAs or a NT control, infected with SARS-CoV-2 and analyzed as in panel A. Data

display the mean of n=3 biological replicates, with error bars representing SEM. Source data are

provided as a Source Data file.

Figure 5. Genetic ablation and chemical inhibition of STING reduces basal ISG levels and

enhances SARS-CoV-2 replication. (a) WT and STING KO SCC25, H596, OE21 and Detroit

562 cells were subjected to RNA-seq analysis. Heatmap shows differentially expressed genes

(absolute $\log_2$ fold change of >2 and an adjusted q value of <0.05 from n=4 independent replicates

for each cell type) in the IFN and inflammatory pathways in any given cell line between the WT

vs. STING KO variant. (**b-g**) RT-qPCR analysis of *IFIT2, MX1* and *IFIT3* in uninfected SCC25,

H596, OE21 and Detroit 562 cells treated with increasing concentrations of SN-011 (**b-d**) and H-

151 (**e-g**) for 48 h. Data show the mean from n=2 independent biological replicates, error bars

show SEM (**h-i**) WT and STING KO SCC25 and STING KO cells were pre-treated with 20 μM

SN-011 (**h**) or H-151 (**i**) for 24h were infected with WT SARS-CoV-2 at MOI: 1 i.u./cell for 72h.

Data show the copies of cell-associated SARS-CoV-2 N RNA in compound-treated cells

normalized relative to mock-treated samples. Data show the mean from n=3 independent

biological replicates, error bars show SEM. Significance was assessed by multiple unpaired two-

tailed t-tests and p values provided in the figure. Source data are provided as a Source Data file.

Figure 6. Cell culture supernatants but not cell lysates from SCC25, H596 and OE21 cells

trigger innate immune activation. (**a, b**) *MX1* expression was analyzed by RT-qPCR in THP-1

cells treated with cell culture supernatants from (**a**) or co-cultured with (**b**) the indicated cell line

panel as explained in Methods. *MX1* expression is normalized relative to mock-treated cells. THP-

1 cells treated with 1000 u/ml IFN-α serves as the positive control. Data show the mean induction

from n=3 independent biological replicates, error bars display the SEM. p values were calculated

by multiple unpaired t-tests with Welch's correction.. (**c, d**) THP-1 or THP-1 STING KO cells were

treated with post-nuclear supernatants (PNS) from the indicated cells, 10 μg/ml 2'3'-cGAMP or

10 μg/ml 2'2'-cGAMP for 24 h, as explained in Methods. *IFN-β* expression was analyzed by RT-

qPCR and normalized relative to 2'2'-cGAMP-treated samples. Data show the mean from n=2

independent experiments, error bars show the SEM. Source data are provided as a Source Data

file.

Figure 7. **SARS-CoV-2 antagonizes the IFN pathway but not IFN synthesis or inflammatory**

pathways in infected cells. (a) Relative expression of ISGs including *ISG15, IFIT1, IFIT2, IFIT3*

and IRF7 in SCC25 cGAS KO, STING KO or NT control cells infected with SARS-CoV-2 at a MOI

of 2 i.u./cell. Cells were collected at 72 hpi and ISG expression analyzed by RT-qPCR. Data show

the fold induction of ISGs in infected over uninfected cells from n=3 biological replicates, errors

bars show the SEM. **(b, c)** SCC25 STING KO or NT control cells were infected with SARS-CoV-

2 at an MOI of 2 i.u./cell. Immunofluorescence detection for IFIT3 expression (in red) and SARS-

CoV-2 nucleocapsid (N) viral protein (in green), and cellular nuclei (DAPI, in blue) at 72hpi from

a representative experiment (n = 2) are shown. Images were collected with an epifluorescence

microscope, 4X objective (**b**) or Zeiss LSM 880 Airyscan confocal microscope equipped with a

×63/1.4 objective (**c**) as detailed in Methods. Scale bars = 250 μm (**b**) or 10 μm (**c**). (**d, e**) SCC25

STING KO cells were infected with SARS-CoV-2-mNG at MOI:1 i.u./cell and cells were single-

cell sorted at 72 hpi to isolate infected (mNG positive) and bystander cells as detailed in Methods.

Expression of the indicated ISGs (**d**) and inflammatory genes (**e**) were analyzed by RT-qPCR in

these sorted cell populations. Data show the mean from two independent replicates, error bars

show the SEM. Source data are provided as a Source Data file.

Figure 8. Analysis of mechanisms that underlie tonic cGAS-STING activation in the

ISG(high) cell lines. (a) Polyclonal populations of SCC25, H596, OE21 and Detroit 562 cells

knocked out (KO) for TREX1 using two separate sgRNAs or wild-type (WT) controls were

analyzed for *IFIT2* expression by RT-qPCR. Data show the relative expression of *IFIT2* in KO

cells compared parental controls (set to 1) from n=3 (OE21) or 6 (SCC25, H596, Detroit 562)

replicates, error bars show the SEM. (**b**) cGAS and STING variants present in the indicated cell

lines derived from RNA-seq data. (**c, d**) SCC25, H596, OE21 and Detroit 562 cells grown in the

presence of 10 μM VBIT-4 for 4 days (**c**) or 500 μM AZT for 3 days (**d**). *IFIT1*, *IFIT2* and *IRF7*

expression was analyzed by RT-qPCR and normalized relative to mock-treated controls (set to

1). Data show the mean from n=3 replicates, error bars show the SEM. (**e**) Following subcellular

fractionation (see Methods), levels of the indicated HERV and LINE DNA elements were

assessed by qPCR in the cytosol and nucleus. Data show the relative levels of each element in

the cytosol relative to the nuclear extract in each cell type (n=2, error bars show SEM). Source

data are provided as a Source Data file.

Figure 9. Analysis of ISG and STING expression in SARS-CoV-2-infected primary human

airway epithelial cells (hTECs) grown at ALI. (a-e) hTECs from five donors grown at ALI were

infected with SARS-CoV-2-mNG at a MOI of 2 i.u./cell and fixed at 72 hpi. Immunofluorescence

detection for IFIT2 expression (in red), ISG15, mNG (in green), and cellular nuclei (DAPI, in blue)

is shown (**a**). Images were analyzed by confocal microscopy with a ×40/1.4 objective. Scale bars

= 20 μm, (representative of n=2). Pearson's correlation (**b, d**) and Mander's overlap (**c, e**)

coefficient derived from imaging experiments. Colocalization analysis of Z stacks was performed

using the Colocalization module of Volocity from 3 to 8 separate Z-stacks. Individual numbers

plotted display the corresponding values from each Z-stack for each Donor, error bars show the

SEM. (**f, g**) hTECs infected as in panel A were stained for STING (in red), SARS-CoV-2 N (in

green), and cellular nuclei (DAPI, in blue). Images (**f**) were analyzed by confocal microscopy with

a ×20 objective. Scale bars = 50 μm, (representative of n=2). Colocalization analysis of Z stacks

was performed as above and Pearson's correlation coefficient derived from 3 to 6 separate Z-

stacks was plotted, error bars show SEM (**g**). (**h, i**) hTECs from three donors were pretreated with

20 μM SN-011 or H-151 for 48h (both apical and basal chambers) and infected with SARS-CoV-

2 mNG as above in the presence of compounds in the basal chamber. Virus release in the ALI

chamber (**h**) and expression levels of the indicated ISGs (**i**) were analyzed by RT-qPCR. Data in

(**h**) show the copies of cell-free SARS-CoV-2 N RNA in culture supernatants of compound-treated

cells normalized relative to mock-treated samples. Data show the mean from n=2 independent

biological replicates, error bars show SEM. Source data are provided as a Source Data file.

Figure 10. Expression profiles of cGAS, STING and representative ISGs in the healthy

human airways. Normalized counts and cell type metadata were downloaded from a publicly

available single-cell study [94]. Detection frequency represents that percentage of cells with > 0

counts for respective gene. Bar plots display the average normalized expression for a gene within

a cell type. For the gene set representing the interferon alpha Gene Ontology term, normalized

expression levels were summed for all genes in the set prior to computing detection frequencies

and average expression.

1175

a SARS-CoV-2 S WT

b Infectious Titer in Supernatants

c

d SARS-CoV-2 viral RNA (2 hpi)   Nuclei (DAPI)

e SARS-CoV-2 RNA

a Cell-associated viral RNA

b cGAS-STING pathway CRISPR KO

g SCC25-associated SARS-CoV-2 RNA

h OE21-associated SARS-CoV-2 RNA

a

IFIT2

relative expression (KO/WT)

SCC25   H596   OE21   Detroit 562

WT
TREX1 SG1
TREX1 SG2

b

	SCC25	**H596**	**OE21**	**Detroit 562**
cGAS	-	T35N	-	T35N, P261H
STING	H232R	H232R	H232R	H232R

c

VBIT-4 (10 μM, 4d)

relative expression (VBIT-4/mock)

IFIT1   *IFIT2*   *IRF7*

SCC25   H596   OE21   Detroit 562

d

AZT (500 μM, 3d)

relative expression (AZT/mock)

IFIT1   *IFIT2*   *IRF7*

SCC25   H596   OE21   Detroit 562

e

relative copies (cytosol/nucleus)

HERV-T (Pol)
HERV-E (Pol)
ERV9 (Pol)
ERV9-Seq59 (Pol)
HERV-K (HML-10, Pol)
HERV-K (HML-2, Gag)
LINE1 (5' UTR)
LINE1 (ORF1)
LINE1 (ORF2)

SCC25   H596   OE21   Detroit 562   Calu-3   HCC827   PC9   KYSE30   A427   H1299